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| Risk Assessment: | Peoples’ Services Department | | | |  |
| **Activity or site:** | Coronavirus COVID-19: Reopening of Schools (Reception, Year 1 and Year 6), alongside priority groups (vulnerable children and children of critical workers) from 1 June 2020.  **This generic assessment should be reviewed and amended to suit the particular circumstances of the school/setting, as each school/setting’s circumstances will be slightly different.** | | | |
| **Date of assessment:** | Insert date | **Approved by:** | Insert name of approver | **Review date:** As changes occur | |
| This risk assessment should be produced and read in conjunction with the latest guidance on school re-opening issued by the Department for Education as follows:   * [Actions for educational and childcare settings to prepare for wider opening from 1 June 2020](https://www.gov.uk/government/publications/actions-for-educational-and-childcare-settings-to-prepare-for-wider-opening-from-1-june-2020?utm_source=3daf3f8c-87d9-4a78-90ec-6196e4a070e5&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate) * [Coronavirus (COVID-19): implementing protective measures in education and childcare settings](https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings?utm_source=0e6da19a-f422-4893-af47-770e78e58269&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate) * [Preparing-for-the-wider-opening-of-schools-from-1-june/planning-guide-for-primary-schools](https://www.gov.uk/government/publications/preparing-for-the-wider-opening-of-schools-from-1-june/planning-guide-for-primary-schools) * [Preparing-for-the-wider-opening-of-early-years-and-childcare-settings-from-1-june/planning-guide-for-early-years-and-childcare-settings](https://www.gov.uk/government/publications/preparing-for-the-wider-opening-of-early-years-and-childcare-settings-from-1-june/planning-guide-for-early-years-and-childcare-settings) * [Covid-19-decontamination-in-non-healthcare-settings](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings)   and should be reviewed regularly to ensure you are still improving, or at least maintaining safety. If there is a significant change in your workplace, remember to check your risk assessment and where necessary, amend it. This assessment must be communicated to all employees on a recorded basis. | | | | | |
| List any relevant HSE or industry guidance documents below. These should be used to consider if current control measures are adequate  Infection at Work: Controlling the Risk (HSE) (<https://www.hse.gov.uk/pubns/infection.pdf>)  INDG136 Working with substances hazardous to health: A brief guide to COSHH (<https://www.hse.gov.uk/pubns/indg136.pdf>)  INDG173 Personal protective equipment (PPE) at work: A brief guide (<https://www.hse.gov.uk/pubns/indg174.htm>)  HSG53 Respiratory Protective Equipment at Work: A Practical Guide (<https://www.hse.gov.uk/pubns/priced/hsg53.pdf>)  HSG262 Managing Skin Exposure Risks at Work (<https://www.hse.gov.uk/pubns/books/hsg262.htm>) | | | | | |

| What are the hazards?  Don’t forget long term health hazards | Who might be harmed and how?  Identify groups of people and how the hazard could cause them harm | Current control measures List what is already in place to reduce the risk of harm. This may include reference to other procedures, systems of work, training, supervision, inspections, etc | Any additional control measures required | **Date implemented** |
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| Inadequate planning and organising prior to opening | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers)   *(may feel tension and stress as a result of poor planning and not having robust arrangements in place to protect all from contracting and spreading COVID-19)* | * Health and safety compliance checks will be undertaken by Headteacher/Site Manager before opening. * The health status and availability of every member of staff is known and is regularly updated so that deployment can be planned. * Timetable refreshed for each year group to consider which lessons or classroom activities will be delivered, which lessons or classroom activities could take place outdoors. * Headteacher to keep up to date with the latest government guidance and adjust working practices as required. * Staff briefed on the control measures within this risk assessment and changes to policies and procedures. * Rigorous checks carried out by the Headteacher to ensure that all the necessary procedures are being followed. * Governing Body, Parents, Staff and Unions consulted when agreeing the best approaches for the circumstances, with regular opportunities for feedback on the new arrangements. * Close working with the Local Authority. * Headteacher or member of Senior Leadership Team to be present around the school during the early part of wider opening to pick up on any issues or problems and support and reassure staff and children. | * Staff Handbook to be reviewed, revised and re-issued September 2020. |  |
| Inadequate Communication of Plans | * Staff * Children and Young People * Parents and Carers * Visitors (ie, Contractors, Suppliers)   *(may feel tension and stress, and may not trust and co-operate with management, as a result of poor communication and not knowing what arrangements have been put in place to protect all from contracting and spreading COVID-19)* | * Staying COVID-19 Secure in 2020 poster displayed upon entrance to the school/setting to confirm the premises have complied with the government’s guidance on managing the risk of COVID-19 ([Staying-covid-19-secure.pdf](https://assets.publishing.service.gov.uk/media/5eb97d30d3bf7f5d364bfbb6/staying-covid-19-secure.pdf)) * Staff briefed on the plans (for example, safety measures, timetable changes and staggered arrival and departure times). * Plans for re-opening clearly communicated to parents and carers, including what protective steps the school/setting has taken to make it a low risk place for their child, with regular updates provided as necessary. * Signage displayed at entrance points to the building asking individuals with symptoms not to enter the premises and to remind staff, children and young people to always keep 2m from other people, wherever possible, and reiterating the kind of symptoms to look out for. * Parents informed that if their child needs to be accompanied to the school/setting, only one parent should attend. * Staff, parents, children and young people informed of their allocated drop off and collection times and the process for doing so. Signage will be used to guide parents and carers to drop off/collection points. * Staff, parents, children and young people briefed and signage provided to identify which entrances, exits and circulation routes to use. * Parents instructed that they cannot gather at entrance gates or doors or enter the site (unless they have a pre-arranged appointment, which will be conducted safely). * Parents, children and young people provided with details of education resources such as [e-bug](https://www.e-bug.eu/) and [PHE schools resources](https://campaignresources.phe.gov.uk/schools). * Parents, children and young people made aware of recommendations on transport to and from the school/setting (including avoiding peak times), following the [Coronavirus (COVID-19): safer travel guidance for passengers](https://www.gov.uk/guidance/coronavirus-covid-19-safer-travel-guidance-for-passengers). * Early consultation and communication undertaken with contractors and suppliers that will need to prepare to support the school’s/setting’s plans for opening (eg, cleaning, catering, food supplies, hygiene suppliers). * Additional cleaning requirements discussed with cleaning contractors or staff, with additional hours agreed to allow for this. |  |  |
| Inability to maintain social distancing to prevent/limit the spread of the COVID-19 virus  *(The most common symptoms are a high temperature (over 37.8oC), a new, continuous cough, and a loss of, or change in normal sense of smell or taste (anosmia)* | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers) * Vulnerable groups (Elderly, Pregnant workers, those with existing underlying health conditions or those from a Black, Asian and Minority Ethnic (BAME) background)   *(May become infected by coming into close contact with someone who has COVID-19, which is primarily spread from person to person, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).*  *COVID-19 symptoms can range from mild (or no symptoms) to severe respiratory illness, which can be fatal.*  *Children are likely to become infected with coronavirus (COVID-19) at roughly the same rate as adults, but the infection is usually mild, with younger children less likely to become unwell if infected with Coronavirus).* | To reduce contact between people as much as possible and the transmission risk:   * Staff, children and young people will be spread out more within classrooms and other learning environments, with rooms/areas re-organised to maintain 2m distancing between chairs and desks, where possible. Spare chairs to be removed so they can’t be used. * Children and young people will be organised into small, consistent class groups to minimise contact. (Cohorts of children and young people will be kept together, where possible, ensuring that children are in the same small groups at all times each day, and different groups are not mixed during the day, or on subsequent days). * Queuing system established and process for staff to greet each child, ensuring they wash their hands upon arrival and go straight to their allocated classroom. * Tape to be used for cordoning off areas and anti-slip adhesive tape for marking floors to help building users keep to a 2m distance and manage queuing, where required. * Clear signage displayed throughout the school/setting, including classrooms, promoting social distancing. * Agreed number of pupils whe can attend the premises on any given day to enable compliance with social distancing rules. * Number of children per class will be limited to minimize contact and mixing:-   + Pre-school children in early years settings will continue to apply the staff to child ratios within the Early Years Foundation Stage (EYFS) and these will be used to group children. (Group sizes will be kept to a maximum of 8 children, where possible, ensuring that there are no more than 16 children in the setting).   + Taking into consideration limitations of the school building and outdoor space available, Primary school classes will be divided to ensure there will be no more than 15 pupils per small group and one Teacher (and, if needed, a Teaching Assistant). Should there be any shortages of teachers, then Teaching Assistants will be allocated to lead a group, working under the direction of a Teacher.   + Vulnerable children and children of critical workers in other year groups will be split into small groups of no more than 15 with desks spaced as far apart as possible.   Where these small groups cannot be achieved, ie, due to there being insufficient classrooms or spaces available, or not having enough available teachers or staff to supervise the groups, advice will be sought from the Local Authority. Solutions might involve children attending a nearby school.   * The same Teacher(s) and other staff will be assigned to each group and, as far as possible, these stay the same during the day and on subsequent days. * Wherever possible and limit movement, children and young people will use the same classroom or area of a setting throughout the day, with a thorough cleaning of the rooms at the end of the day. * Wherever possible, children and young people will be seated at the same desk each day if they attend on consecutive days. * One-way circulation in operation, or a divider placed down the middle of communal corridors to keep groups apart as they move through the school/setting where spaces are accessed by corridors. Clear signage will be in place to depict the one-way system in operation. * Rooms will be accessed directly from outside wherever possible to reduce mixing, with different entrances/exists to be used for different class groups. * Staggering of start and finish times/drop-off and collection times to reduce mixing between groups and volume at entrance points. * Staggering of breaks to ensure that any corridors or circulation routes used have a limited number of children and young people using them at any time, keeping contact to a minimum and avoiding pinch points and bottlenecks wherever possible. * Staggering of lunch breaks with children and young people cleaning their hands beforehand. * Children and young people to be reminded of social distancing as break/lunch times begin. * Supervision levels enhanced at break/lunch times, especially for young children, to support social distancing. * Limiting the number of children or young people who use the toilet facilities at one time to ensure the toilets do not become crowded, together with identified and marked queuing zones. These areas will be monitored closely by staff. * Use of outdoor space, wherever possible, for exercise and breaks and outdoor education, to limit transmission and more easily allow for distance between children and staff. External areas to be designated for different groups. * Physical Education lessons will be strictly non-contact and not involve more than any one temporary group (ie, supervised non-touch running games). * Outdoor equipment will not be used. * Assemblies will take place with individual groups in their allocated classroom spaces rather than bringing children from different classes together into one hall or large space. * Shared rooms such as halls, dining areas and internal and external sports facilities for lunch and exercise will be used at half capacity. (Where different class groups take staggered breaks between lessons and share such areas, they will not be allowed to mix, they will not play sports or games together and there will be adequate cleaning between groups). * Where lifts are installed for disabled persons, the maximum occupancy will be reduced, the lift operating controls will be frequently cleaned and hand sanitiser will be adjacent to lift landings/lobbies. * Staff, children and young people to be regularly reminded of the importance of social distancing both in the school/setting and outside of it, taking steps to minimise opportunities for the virus to spread by maintaining a distance of 2m between individuals, wherever possible. * Unnecessary items will be removed from classrooms and other learning environments where there is space to store it elsewhere. * Staff will modify their teaching approach to keep a distance from children and young people in their class as much as possible, particularly close face-to-face support (noting that this is not possible at all times, which is why hygiene and hand cleaning is so important). * Staggering the use of staff rooms and offices to limit occupancy. (Where it is not possible to move workstations further apart, barriers or screens will be used to separate staff from each other or staff will work side by side or facing away from each other rather than face-to-face). * Staff will work from same workstation and be instructed not to share equipment, wherever possible. * Only essential visitors/contractors allowed onto site by appointment. * Additional controls to be put in place where children and young people need additional support to follow the measures implemented (eg, routes round school marked in braille or with other meaningful symbols, and social stories to support them in understanding how to follow rules). * A separate risk assessment will be carried out if it is deemed that a child or young person may not be able to follow instructions, to determine what mitigations need to be put in place and whether, in rare circumstances, they should stay at home. | Schools/settings with specialist and technical work or learning areas such as Science, should refer to CLEAPSS information on [how to manage these areas during this outbreak](http://science.cleapss.org.uk/Resource-Info/GL336-CLEAPSS-Advice-during-the-COVID-19-Coronavirus-Pandemic.aspx). |  |
| Ineffective cleaning and hygiene during the outbreak | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers) * Vulnerable groups (Elderly, Pregnant workers, those with existing underlying health conditions or those from a Black, Asian and Minority Ethnic (BAME) background)   *(may become infected by coming into close contact with someone who has COVID-19, which is primarily spread from person to person, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).* | * School to be thoroughly cleaned prior to re-opening. * Sufficient handwashing facilities available for the expected number of building occupants, with soap, hot and cold running water and means of drying hands, ie, paper towels/hand dryer. * Alcohol-based hand sanitizer (containing at least 60% alcohol) will be placed at building entrance/exit points, in either wall mounted or fixed floor mounted dispensers. Additional hand sanitizer/hand rub will be located in classrooms and other learning environments where access to handwashing is not readily available. These will be replenished regularly. * ‘Use hand sanitiser’ safety sign and NHS ‘alcohol hand rub hand hygiene technique – for visibly clean hands’ posters displayed adjacent to hand sanitiser dispensers. <https://www.sthelensccg.nhs.uk/media/1641/hands-with-gel.pdf> * Objects and surfaces that are frequently touched (eg, toys, books, desks, chairs, door handles, sinks, toilets, etc) will be cleaned more regularly following Public Health England (PHE) [COVID-19: cleaning of non-healthcare settings guidance](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings). * The use of high-touch items and equipment, for example, printers or whiteboards, will be limited/restricted. * All staff, children and young people will be reminded to:   + Frequently wash their hands with soap and water.   + Clean their hands upon arrival at the school/setting, after using the toilet, after breaks, before and after eating – including snacks, after blowing their nose, sneezing or coughing and before leaving the school/setting.   + Avoid touching their mouth, eyes and nose, and to use a tissue when coughing or sneezing, following the NHS ‘Catch it, Bin it, Kill it’ approach.   Signage/posters reinforcing these messages will be displayed throughout the school/setting.   * Children and young people will be supervised to ensure they wash their hands correctly and those who have trouble cleaning their hands independently will be supported by staff. * Young children encouraged to learn and practice these good hygiene habits through games, songs and repetition. * Non-touch (lined and foot operated) lidded bins provided throughout the school/setting for disposal of used tissues, which are emptied regularly throughtout the day. * All spaces will be well ventilated using natural ventilation (opening windows) or mechanical ventilation units. * Monitoring arrangements in place to ensure sufficient supplies of soap, hand towels, hand sanitizer and tissues are maintained. * Disposable paper towels provided within kitchen areas for drying hands/dishes. |  |  |
| Inappropriate cleaning methods adopted for cleaning and disinfection | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers) * Vulnerable groups (Elderly, Pregnant workers, those with existing underlying health conditions or those from a Black, Asian and Minority Ethnic (BAME) background)   *(may become infected with COVID-19 by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).* | * Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids will be cleaned thoroughly as normal using standard cleaning products. * All surfaces that a symptomatic person has come into contact will be cleaned and disinfected, including: objects which are visibly contaminated with body fluids and all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells. * Cleaning will be disposed of in line with the Government’s [guidance on cleaning for non-healthcare settings](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings). * Cleaning staff will be issued with suitable PPE, which will be worn at all times while cleaning. (see PPE section) |  |  |
| Inappropriate handling and disposal of waste | * Staff * Children & Young People * Visitors (ie, Contractors, Suppliers) * Vulnerable groups (Elderly, Pregnant workers, those with existing underlying health conditions or those from a Black, Asian and Minority Ethnic (BAME) background)   *(may become infected with COVID-19 through inappropriate handling, storage or disposal of infectious waste)* | * Waste will be disposed of in line with the Government’s [guidance on cleaning for non-healthcare settings](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings). * Waste from possible cases and cleaning of areas where possible cases have been (including tissues, disposable cloths, disposable PPE) will be placed in a plastic rubbish bag and tied when full; then placed into a second bin bag and tied. It will then be stored in a suitable and secure location, away from children and separated from communal waste areas, and marked for storage for at least 72 hours and put in with the normal waste. * Where storage of such waste for at least 72 hours is not appropriate, the waste will be placed into a clinical waste bag and a Category B infectious waste collection will be arranged via the school’s/settings’s usual specialist Clinical Waste Collection Service, so the waste can be sent for appropriate treatment. |  |  |
| Inadequate provision, handling or use of Personal Protective Equipment (PPE) | * Staff * Children & Young People   *(may become infected with COVID-19 due to a lack of suitable PPE when undertaking direct care, incompatibility of PPE, lack of instruction and training on its proper use)* | * Existing routine use of PPE will continue for care of non-symptomatic children and young people who have intimate care needs or who present behaviours which may increase the risk of droplet transmission (such as spitting). * Appropriate PPE will be provided and worn by supervising staff should a child or young person become unwell with symptoms of Coronavirus while in the school/setting and need direct personal care until they can return home. These include:   + a fluid-resistant surgical face mask, if a distance of 2m cannot be maintained;   + a fluid-resistant surgical face mask, disposable gloves and a disposable plastic apron if physical contact with the child or young person is necessary, then and will be worn by the supervising adult.   + eye protection (ie, face visor or goggles) where a risk assessment determines that there is a risk of splashing fluids entering the eyes (eg, from coughing, spitting, or vomiting). * Cleaning staff will be issued with and wear disposable gloves and aprons for general cleaning. However, if an area has been heavily contaminated, such as with visible bodily fluids, from a person with suspected Coronavirus (COVID-19), the use protection for the eyes, mouth and nose, will also be worn. * Guidance on [safe working in education, childcare and children’s social care](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care) referenced for preventing and controlling infection, including the use of PPE. * Relevant staff trained on [how to put PPE on and take it off safely](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-non-aerosol-generating-procedures) and the need for scrupulous hand hygiene in order to reduce self-contamination. * Local supply chains established and maintained for the obtaining of PPE. * Only PPE that is CE marked and purchased from a reliable source will be used by staff. * Staff to be reminded:   + to avoid touching their face, eyes, nose or mouth when wearing PPE (ie, gloves).   + that torn or otherwise damaged PPE is not to be used and removed immediately if this occurs during use.   + to cover any cuts and abrasions with a waterproof dressing.   + that the wearing of gloves is not a substitute for good hand washing protocols. |  |  |
| Contact Dermatitis, skin irritation, exacerbation of existing skin conditions | * Staff   *(may suffer contact Dermatitis, skin irritation or exacerbation of an existing skin condition as a result of frequent hand washing)* | * Staff encouraged to regularly use moisturising hand cream to prevent skin from drying and cracking, and to report any skin conditions or new skin symptoms (ie, Psoriasis or Dermatitis) affecting the hands as a result of frequent handwashing. * Access to the Council’s Occupational Health Advisor for further advice on skin care/monitoring. |  |  |
| Inappropriate use of Alcohol-based Hand Sanitisers or Hand Rub that contains at least 60% alcohol | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers)   *(may cause alcohol poisoning if ingested and may be ineffective against the virus if used incorrectly)* | * COSHH Risk Assessment completed for use of hand rub/sanitiser within the school/setting. * Hand sanitiser/hand rub will only be used where access to hand washing with soap and running water is not readily available and where hands are not visibly soiled. * Bottles of hand santiser/hand rub to be stored out of the sight and reach of young children to reduce unintended, adverse consequences. * Where hand sanitisers has to be used by children and young people, this will be used under strict adult supervision. * Staff, children and young people encouraged to report any adverse effects experienced with the use of hand sanitizer/hand rub, with advice sought from GP where serious reactions occur. |  |  |
| Vulnerable Groups at higher risk of severe illness from Coronavirus (COVID-19) | * Elderly staff * Pregnant staff * Children & Young People * Parents & Carers * Those with existing underlying health conditions or from a Black, Asian and Minority Ethnic (BAME) background   *(who are at higher risk of severe illness from contracting Coronavirus)* | * Staff, children and young people who have been [classed as ‘Clinically Extremely Vulnerable’ (due to pre-existing medical conditions](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/covid-19-guidance-on-protecting-people-most-likely-to-get-unwell-from-coronavirus-shielding-young-peoples-version) and are at higher risk of severe illness from Coronavirus) have been advised to shield and are not expected to attend the school/setting. Working from home has been facilitated for such staff, wherever possible, with them supporting remote education, carrying out lesson planning or other roles which can be done from home. Children and young people will continue to be supported to learn at home as much as possible. * Parents of ‘Clinically Vulnerable’ (but not clinically extremely vulnerable) children and young people, considered to be at a higher risk of severe illness from Coronavirus, will be advised to follow medical advice if their child falls into this category. * Staff who are ‘Clinically Vulnerable’ (but not clinically extremely vulnerable) and at higher risk of severe illness (for example, people with some pre-existing conditions) have been advised to take extra care in observing social distancing and will continue to work from home where possible. Where such staff cannot work from home, they will be offered the safest available on-site roles, staying 2 m away from others wherever possible as determined by an individual risk assessment. * If a staff member, child or young person lives in a household with someone who is ‘E[xtremely Clinically Vulnerable and Shielding](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19)’, they will only attend the school/setting if stringent social distancing can be adhered to and the child or young person is able to understand and follow those instructions. Otherwise they will be supported to learn or work at home. * Risk assessments will be completed for staff, children and pupils who are BAME and therefore, may be more susceptible to poor outcomes if infected by COVID-19. |  |  |
| Use of Shared Equipment and Resources | * Staff * Children and Young People   *(may become infected by touching equipment and resources that have the COVID-19 virus on them, and then touching their mouth, nose, or eyes).* | * The use of shared resources will be reduced by:   + minimizing the number of shared resources in use within the classroom;   + limiting the amount of shared resources that are taken home and limiting exchange of take-home resources between children, young people and staff.   + seeking to prevent the sharing of stationery and other equipment where possible. * Soft furnishings, soft toys and toys that are hard to clean (such as those with intricate parts) will be removed from use. * Shared materials and surfaces will be cleaned and disinfected more frequently. * Practical lessons will only be undertaken if equipment can be cleaned thoroughly and the classroom or other learning environment is occupied by the same children or young people in one day, or properly cleaned between cohorts. * Play equipment is appropriately cleaned between groups of children using it, and multiple groups do not use it simultaneously. * Malleable resources, such as play dough, where used with younger children will not be shared. * Resources for activities such as painting, sticking, cutting, small world play, indoor and outdoor construction activities should be washed before and after use and children will be discouraged from sharing these. |  |  |
| Travelling to School during the outbreak | * Staff * Children and Young People   *(may become infected by coming into close contact with someone who has COVID-19, by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).* | * Staff, children and young people encouraged to walk or cycle to their school/setting where possible and avoid public transport at peak times. * Travel arrangements will be revised in consultation with the Home to School Transport Service, where required, for relevant children and young people. This will include the measures being put in place to reduce contact. |  |  |
| Inadequate Induction of New and Temporary Staff | * Staff (including Supply Teachers and other temporary workers)   *(may suffer injury or ill health through a lack of understanding on the hazards and risks they may face, the control measures in place and emergency procedures to be followed)* | * Induction of staff will continue either remotely or in school in line with social distancing guidelines. * New and Temporary staff will be provided with clear instructions and information, and adequate training, on how to work safely, including arrangements for infection control, social distancing, first aid, fire and evacuation. |  |  |
| Inadequate First Aid Facilities, Personnel and Equipment and Information for First Aiders | * Staff * Children and Young People * Visitors * Designated First Aiders   *(may not receive immediate first aid treatment due to insufficient first aid facilities, personnel and equipment; and First Aiders may become infected through close contact with casualties infected with COVID-19 or spread infection through poor hygiene practices)* | * First aid needs assessment reviewed to determine adequate and appropriate equipment, facilities and personnel to ensure staff, children and young people receive immediate attention if they are injured or taken ill. * There will always be at least one person with First Aid at Work or Emergency First Aid at Work training available within the school setting, and at least one person with Paediatric First Aid training available for the EYFS. * Standard Infection Prevention and Control Procedures (ie, maintaining good hand, respiratory and personal hygiene) followed at all times by First Aiders to protect themselves and others and limit the risk of spread of COVID-19. * Contact with casualties potentially infected with COVID-19 to be limited as much as possible (avoid touching them, their immediate environment and any waste). * PPE provided and used by first aiders as necessary (ie, fluid resistant surgical mask, disposable gloves, disposable apron (and goggles or visor where the risk of splashing is present). * The use of chest compressions only will be performed by First Aiders should cardiopulmonary resuscitation (CPR) be required. No rescue breaths or mouth-to-mouth ventilation will be performed. Where First Aiders have access to an AED, then this will be used, as using these carry no risk of virus spread. * Headteachers to share with first aiders the latest NHS advice on how to respond to a first aid incident and the Resuscitation Council’s guidance on COVID-19 in relation to CPR and resuscitation in first aid and community settings, when dealing with first aid incidents during the outbreak. <https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov> and <https://www.resus.org.uk/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/>. * Medical Room re-organised in line with social distancing provisions. |  |  |
| Individuals displaying Symptoms of Coronavirus (COVID-19) whilst attending the school/setting  *(The most common symptoms are a high temperature (over 37.8oC), a new, continuous cough, and a loss of, or change in normal sense of smell or taste (anosmia)* | * Staff * Children & Young People * Parents & Carers * Visitors (ie, Contractors, Suppliers) * Vulnerable groups (Elderly, Pregnant workers, those with existing underlying health conditions or those from a Black, Asian and Minority Ethnic (BAME) background)   *(may become infected by coming into close contact with someone who has COVID-19, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).*  *COVID-19 symptoms can range from mild (or no symptoms) to severe respiratory illness, which can be fatal.* | * Staff, children and young people, parents, carers or any visitors, such as contractors, suppliers, etc, will be instructed not to attend or enter the school/setting if they or someone within their household has is displaying any symptoms of Coronavirus to avoid spreading infection to others. * If a child, young person or staff member develops symptoms compatible with Coronavirus (whilst at the school/setting, they will be sent home and advised to self-isolate for 7 days. Their fellow household members should self-isolate for 14 days. * All staff, children and young people attending the school/setting will have access to a test if they display symptoms of Coronavirus, as will members of their household. * Where the child, young person or staff member tests negative, they will be allowed to return to the school/setting and their fellow household members can end their self-isolation. * Where the child, young person or staff member tests positive, the rest of their class/group will be sent home and advised to self-isolate for 14 days. The other household members of that wider class/group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms. * Isolation Room (a clean, well-ventilated room, with opening window, closable door and minimal non-fabric furniture) will be identified, in a location away from staff, children and young people and other visitors, for the isolation of any potentially infectious child/individual who cannot be immediately leave the setting. Appropriate adult supervision will be provided for children, where required. (Where it is not possible to isolate the child/individual, they will be moved to an area which is at least 2 metres away from other people). * Protocol in place for responding to a suspected case of Coronavirus within the school/setting. * PPE will be worn by staff caring for any symptomatic child whilst they await collection, if a distance of 2m cannot be maintained. * Temperature monitoring or asking parents to report children and young people’s temperature at the start of the day will not be undertaken, as this is not a mandatory requirement. |  |  |
| Lack of testing, inspection and maintenance of Building-Related Systems | * All building occupants   *(may be exposed to increased risk of injury or ill health from a lack of testing, inspection and maintenance of building related systems not being operational due to the school/setting being completely or partially closed, or having reduced occupancy during the Coronavirus (COVID-19) outbreak)* | * Member of staff identified with responsibility for managing the premises (with cover arrangements put in place in case of staff illness), reviewing risk assessments and implementing any measures to ensure that safety is maintained for wider opening. * All systems within school buildings that have been completely or partially closed, will be re-commissioned before re-opening, as would normally be done after a long holiday period. This will be undertaken in consultation with the school’s Competent Person(s)/Property Support Officer, but in particular:   **Hot and Cold Water Systems** (ie, tanks, sinks, basins, showers, drinking water outlets – taps and water fountains, calorifiers, direct-fired water heaters)   * + - Water systems which have not been maintained or remained partly operational at a reduced capacity during the lockdown, will be disinfected, flushed and certified by a competent contractor before the school re-opens.   **Gas safety**   * + - Gas services remain in normal operation and planned gas safety checks including gas detection and/or interlocking continue to be undertaken.   **Fire Safety**   * + - Fire safety management and evacuation plans reviewed and updated in line with operational changes, as necessary, and communicated to all staff, children and young people.     - Fire assembly point re-organised to meet social distancing requirements.     - Regular testing of fire alarm and detection systems, call points, emergency lighting and other fire safety systems undertaken to ensure they remain fully operational.     - Regular hazard spotting carried out to identify escape route obstructions.     - Daily checks to ensure that all fire doors are operational.     - Fire drills continue to be held on a termly basis as normal, with a practise undertaken in the first week when more pupils return.     - Staff instructed not to wedge open self-closing fire doors to avoid the need to touch door handles/locks. These doors must remain closed to prevent the risk of uncontrolled fire spread and smoke should a fire occur.   **Security including access control and intruder alarm systems**   * + - All areas of the school kept secure in line with current security arrangements.     - Keyholder information updated, as necessary.   **Ventilation**   * + - All systems remain energised in normal operating mode.     - Natural ventilation via windows or vents will be used as far as possible and where available occupied room windows will be opened.     - Where centralised or local mechanical ventilation is present, recirculatory systems have been adjusted to full fresh air. (If this is not possible, systems will be operated as normal). Where ventilation units have filters present, enhanced precautions must be taken when changing filters.   **Electrical Systems**   * + - Building-related electrical systems remain in use and are tested as appropriate.   **Drainage Systems**   * + - Checks on traps undertaken to ensure they have not dried out and water seals are in place to prevent smells within the building, for example, hygiene rooms, sports hall showers.     - Where toilets are put back into use, flushing of toilets to be undertaken with the lids down and toilet ventilation systems working.   **Plant and Equipment**   * + - Plant and equipment continues to be maintained in line with manufacturer’s instructions.     - Scheduled thorough examination and testing of lifting and pressure equipment to continue to be undertaken during the Coronavirus outbreak, following the updated HSE Guidance during the Coronavirus outbreak. <https://www.hse.gov.uk/news/assets/docs/loler-pssr-during-outbreak.pdf>.     - School/setting will agree safe access and working arrangements with the contractor prior to commencing work on site.     - Should problems be experienced in arranging scheduled thorough examinations, due to demands on inspection services, the school/setting will adopt a risk based process, in consultation with their Competent Person, to determine the whether there are steps that can be taken to safely continue to use equipment (that has not had its scheduled thorough examination and testing) or decide to stop using the equipment. |  |  |
| Inadequate arrangements for School Meal provision | * Staff * Children and Young People   *(may become infected by coming into close contact with someone who has COVID-19, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).*  *COVID-19 symptoms can range from mild (or no symptoms) to severe respiratory illness, which can be fatal.* | * School/setting will continue working with their Catering Service provider to ensure food is available for children and young people who attend and ensure staff are able to prepare, serve and work safely. * Lunch times (and any ‘snack’ times for early years) arranged so that children eat their lunch in their assigned groups and do not mix with children from other groups, by either: having several lunch sittings or serving lunch in more than one location, including (if appropriate) in their assigned classroom. * Children and young people will clean their hands before eating their lunch. * Tables will be cleaned between each group. * Dining area layouts configured to ensure social distancing with tables and chair cordoned off where this is not possible. |  |  |
| Stress, Mental Health and Wellbeing adversely affected during the outbreak and upon return to school/setting | * Staff * Children and young people   *(may be suffering with stress, mental health or wellbeing difficulties as a result of feeling disconnected, isolated from others or abandoned due to being/working at home for a long period of time; with children and young people missing the routine of school, seeing their friends and being supported by Teachers and other adults in the school/setting. Also, having experienced bereavements in their immediate family or wider circle of friends, or had increased caring responsibilities)* | * Access to PHE online resources to promote and support mental wellbeing of children whilst learning at home. This includes [wider guidance](https://www.gov.uk/government/publications/covid-19-guidance-on-supporting-children-and-young-peoples-mental-health-and-wellbeing) on supporting children and young people’s mental health * Digital support includes:   + [an educational resource](https://www.minded.org.uk/) for adults about children and young people’s mental health.   + The PHE [Every Mind Matters platform](https://www.nhs.uk/oneyou/every-mind-matters/) about looking after your own mental health   + [Rise Above](https://riseabove.org.uk/), targeted at young people, which also has [schools-facing lesson plans](https://campaignresources.phe.gov.uk/schools/topics/rise-above/overview). * Children and young people will be provided with opportunities to talk about their experiences over the past few weeks, one-to-one conversations with trusted adults, where this may be supportive. * Positive opportunities will be provided for children and young people to renew and develop friendships and peer groups and other enriching developmental activities. * Regular communication of mental health information and resources, and an open-door policy in place for those staff who need additional support. * Trained Workplace Mental Health First Aiders available for staff who may be experiencing a mental health issue or emotional distress. * Counselling services available via Management/Self-Referral to the Occupational Health Unit for any staff who are particularly anxious. * Staff workload monitored by management and adjusted as necessary. * Member of the Senior Leadership Team to keep in touch with home workers and ensure regular contact is made with them to make sure they are healthy and safe, recognising any signs of stress as early as possible. * Staff encouraged to speak regularly with their colleagues. | * The Council’s ‘Adapting to the New Norm’ guidance issued to all staff. |  |
| Altered behaviours when returning to the school/setting which may affect social distancing guidelines | * Staff * Children and Young People   *(may become infected by coming into close contact with someone who has COVID-19, through disregard of the new arrangements)* | * Behaviour Policy to be reviewed and updated to reflect the new protective measures and new rules and routines. This includes appropriate consequences (such as sanctions and rewards), so that staff can ensure pupils understand them and can enforce them rigorously. * Clear messages given to children and young people on the importance and reasons for social distancing in reinforced throughout the day by staff and through posters and floor markings. For young children this will be done through age appropriate methods such as games and stories. * Senior Leaders monitor areas where there are breaches of social distancing measures and the arrangements are reviewed. |  |  |
| Educational Visits | * Staff * Children and Young People * Parent Volunteers | * Educational visits have been temporarily suspended and will be reviewed as the pandemic reduces in accordance with DfE and the latest Government advice on [coronavirus travel advice for educational settings](https://www.gov.uk/government/publications/coronavirus-covid-19-travel-advice-for-educational-setting). |  |  |
| Home working  (Working with Display Screen Equipment (DSE)) | * Staff (working at home on a long-term basis)   *(may suffer pain in their necks, shoulders, backs, arms, wrists and hands as well as fatigue and eye strain as a result of incorrect use of DSE or poorly designed workstations or work environments)* | * Staff working at home with DSE will be encouraged to ensure that they set up their workstation to avoid :   + avoid awkward, static postures by regularly changing position;   + get up and move or do stretching exercises;   + avoid eye fatigue by changing focus or blinking from time to time. * Basic home workstation self-assessment to be completed by staff working at home on a long-term basis and who use DSE daily, for an hour or more at a time, using the HSE’s practical workstation checklist <https://www.hse.gov.uk/pubns/ck1.pdf> * Where possible, additional DSE equipment provided or allowed to be taken home by staff to support prolonged use of portable DSE at home (eg, separate monitor, keyboard, mouse, monitor riser, ergonomic chair). |  |  |
| Face to face meetings | * Staff * Children & Young People * Parents & Carers * Visitors   *(may become infected by coming into close contact with someone who has COVID-19, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).* | * Remote working tools (ie, video/tele-conferencing) utilised instead of face to face meetings, wherever practicable. * Where a face to face meeting cannot be avoided and is the only option, participants will be kept to the absolute minimum with only essential persons present and social distancing will be maintained throughout. * Meetings will be held outdoors, wherever possible, or in well-ventilated room (ie, opening window) of sufficient size. * The sharing pens and other objects will be avoided to prevent transmission during meetings. * Hand sanitiser will be provided in meeting rooms. * Meeting room thoroughly cleaned after each use. |  |  |
| Contractors on-site whilst school is in operation may pose a risk to social distancing and infection control | * Staff * Children and Young People * Parents/Carers * Contractors   *(may become infected by coming into close contact with someone who has COVID-19, and by respiratory droplets produced when an infected person coughs, sneezes, or talks; or by touching a surface or object that has the virus on it, and then touching their mouth, nose, or eyes).* | * Ongoing works and scheduled inspections for schools (eg, estates related) have been designated as essential work by the government and will continue. * Assurances have been sought from the contractors that all staff attending the setting will be in good health (symptom-free) and that contractors have procedures in place to ensure effective social distancing is maintained at all times. * Arrangements in place for contractors to use a different entrance to staff and pupils, where possible, and classes organised so that contractors and staff/children and young people are kept apart. * Contractors will be monitored to ensure social distancing is being maintained throughout any such works. * Normal contractor procedures are being applied and have been updated in light of COVID-19 (including contractor risk assessments and method statements, and contractor induction, where required) in consultation with Property Services. |  |  |
| Lack of governor oversight during the COVID-19 crisis leads to the school failing to meet statutory requirements. | * Staff * Children & Young People   (failure t ensure controls are implemented may result in infection) | * The governing body continues to meet regularly via online platforms. * The governing body agendas are structured to ensure all statutory requirements are discussed and school leaders are held to account for their implementation. * The Headteacher’s report to governors includes content and updates on how the school is continuing to meet its statutory obligations in addition to covering the school’s response to COVID-19. * Regular dialogue with the Chair of Governors and those governors with designated responsibilities is in place. * Minutes of governing body meetings are reviewed to ensure that they accurately record governors’ oversight and holding leaders to account for areas of statutory responsibility. |  |  |