



Covid-19 risk assessment for a full return to school September 2020

Date of assessment: 1st September 2020

Assessor: Moya Whitehead (in consultation with governing body)

Review date: Friday 18th September

Summary of management measures (this is not exhaustive:

- Regular and repeated hand washing/sanitizing: on arrival, before food, after visiting the bathroom, on entry/exit to the classroom.
- Enhanced cleaning regime
- Class groups to remain in segregated bubbles: pupils and staff not to mix, staggered arrival and departure, staggered breaks (use of alternative entry gate for parents to prevent mass handling of a gate)
- Parents to be encouraged to wear masks on school site due to potential close proximity on path from the back gate
- No mass congregations including no assemblies, lunch in bubbles, provision of bubble staffrooms and managed access to the toilets
- Limited sharing of equipment and no sharing across bubbles with personal equipment where possible
- Music and ICT teaching to be taught in bubble rotas so only one year group per week
- School discipline account for those who disrupt or endanger pupils/staff
- PPE available for all staff and additional PPE (and Perspex screen) for peri music teachers and close working staff and first aid staff
- Pupils with Covid symptoms will be isolated in the Headteacher office with all windows open

- Monitor and isolate all who have symptoms – cooperate with test and track
- Minimise visitors to the school to essential professionals.

Significant hazard	Who/what is at risk	Risk <i>(This is estimated residual risk with control measures in place)</i>			Control measures
		L	M	H	
<p>Injuries or ill-health arising from failure to maintain the building</p> <p>Examples include: legionella contamination, failure to raise alarm in event of fire etc.</p>	Staff, pupils and visitors	X			<ul style="list-style-type: none"> • Essential site maintenance should continue as normal • Fire Drill to be carried out as normal but using dots on playground for socially distanced lining up • Contractors entering the site will do so by appointment and will abide by hygiene controls and work to 1m + social distancing
<p>Staff or pupils with symptoms</p> <p>Potential for contracting COVID-19 via direct or indirect contact with someone displaying symptoms</p>	Staff, pupils and visitors		X		<ul style="list-style-type: none"> • No staff or pupils to attend if they are symptomatic. • Contact-free thermometers to be provided at each site to monitor pupils if they feel unwell. • Those who display symptoms (continuous cough, high temp and loss/change to sense of smell/taste) whilst on site must return home as soon as possible. Parents must ensure that the child is tested.

					<p>The child may return to school once a negative test has been shared or after the directed period of isolation.</p> <ul style="list-style-type: none"> • Isolation room provided for those with symptoms to wait until collected. • Those displaying symptoms are to cover their mouth/nose with a mask until they can leave. • Stocks of tissue, hand-sanitiser and cleaner-sanitiser to be located in the office/medical room. • PPE also to be to hand for use by staff assisting this person if this is unavoidable (see First Aid section). • The room must be deep cleaned following this isolation • Positive test result of the child would mean isolation of class bubble for 14 days
<p>Shielding the vulnerable</p> <p>Potential for contracting COVID-19 via direct or indirect contact whilst attending school site with elevated consequence</p>	<p>Staff, pupils, cohabitants of staff/pupils</p>		X		<ul style="list-style-type: none"> • Vulnerable staff (including expectant mothers, over-70s, BAME staff, those with medical conditions whereby they are advised to have an annual flu-jab) should follow medical advice around returning to work. They

					<p>should wear provided PPE and ensure they adhere to strict social distancing</p> <ul style="list-style-type: none"> • Highly vulnerable pupils should follow medical guidance in respect of their return to full-time education.
<p>Social distancing</p> <p>Potential for contracting COVID-19 via direct contact whilst attending school site</p>	<p>Staff, pupils and visitors</p>		X		<p>Pupils:</p> <ul style="list-style-type: none"> • Population density will mean that pupils will not be able to maintain social distancing upon a full return. • So we need to maintain class 'bubble' and avoid mass congregation. • Class bubbles not to mix: no assemblies and lunch in the hall • No PE activities across classes and these should be outdoors • Staggered start/end times to minimise mass contact at beginning and end of day. • Playground gate to car park to be used and pinned back • Bollards and ribbon installed • Parents encouraged to use face masks whilst on site • Staggered break/lunch times.

					<ul style="list-style-type: none">• Breaks segregated by space where segregation by time is not possible.• One-way system to be maintained to reduce corridor congestion as well as entrances direct into the classroom where possible.• Classrooms laid out to avoid face to face positioning with tables in rows, facing forwards.• Pupils should have their own pack of frequently used resources provided by the school.• 1:1 support staff to limit direct face to face contact as far as is practicable by positioning side to side and use PPE provided• If there is a risk of spitting from a specific pupil then a face-shield must be worn <p>Visitors:</p> <ul style="list-style-type: none">• There should be no non-essential visitors without prior appointment.• Parents and ad-hoc visitors must not be granted access and reception should remain
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					<p>closed to those without an appointment.</p> <ul style="list-style-type: none">• Class email addresses to be communicated to all parents to support effective partnership with staff• Contractors who must attend for essential maintenance must follow hygiene practices and must maintain the 1m or more rule, as with staff. Wherever practicable (and as is consistent with safeguarding protocols), they must be left alone in the room where their work can be undertaken (e.g. plant room etc). <p>Food provision:</p> <ul style="list-style-type: none">• Pupils partaking in school meals pre-order from a limited menu option.• No shared cutlery/crockery to be used - menu choices designed around that concept.• Food either delivered to class to maintain class bubble• Hand sanitising ahead of food collection (hand sanitiser at front of refectory queue)
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					<ul style="list-style-type: none"> • Food consumed in teaching room bases or in segregated external space in fine weather
<p>Hygiene Potential for contracting COVID-19 via direct and indirect contact whilst attending school site</p>	Staff, pupils and visitors	X			<p>Hand-hygiene:</p> <ul style="list-style-type: none"> • Ongoing regular hand-hygiene is the principal control for indirect transmission. • Hand washing or hand sanitising with alcohol hand sanitiser must be undertaken at the following times: Upon arrival, after using a bathroom, before and after food, upon entering and leaving any class bubble, after coming in from outside recreation, upon final departure. Therefore, hand-sanitiser must be available at the entrance/s to each teaching space and class bubble. • Staff to undertake hand-hygiene after handling pupils' work.(work not to be taken home to mark) • Hand hygiene should also be undertaken after use of any

					<p>shared resources within the class bubble.</p> <ul style="list-style-type: none">• Staff should supervise hand sanitising in teaching spaces.• All visitors must wash/sanitise their hands upon arrival and departure. <p>Respiratory hygiene:</p> <ul style="list-style-type: none">• Good respiratory hygiene – ‘Catch it, Bin it, Kill it’ to be followed and modelled as much as possible.• Tissues and covered bins to be provided in each room• Behaviours to be taught and modelled at all ages.• Regular checks of bathrooms must be undertaken to ensure that stocks of soap etc are available.• Pupil access to bathrooms to be controlled by staff in the rooms to limit numbers as well as to control behaviour.• Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers. This should be considered in pupil support. <p>Cleaning:</p>
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					<ul style="list-style-type: none">• Demands of whole school opening in combination of reduced national risk means all rooms utilised in the timetable should be cleaned daily with wipes and spray available for staff to clean surfaces during the day• Reduction in displays around rooms to limit clutter and potential for trapped dirt to gather.• Clear desk policy: staff to clear hard surfaces to allow for cleaning.• A disinfectant/cleaner (either combined or separate) to be used. Ensure that this has a confirmed viricidal action.• Launder cloths daily or use disposable paper rolls. ▪ Cleaning protocol circulated.• Regularly touched hard-surfaces to be sanitised: tables, desk tops, light switches, keyboards/mouse, phones, taps, flush handles. Cleaner-sanitiser and paper towel to be located in• Cleansing wipes to be located by photocopiers to allow users to wipe
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					buttons/touchscreen after each use.
<p>First Aid Potential for contracting COVID-19 from direct and indirect contact with child due to administration of First Aid</p>	Staff, pupils and visitors		X		<p>First Aid:</p> <ul style="list-style-type: none"> • Delivering First Aid will often necessarily mean that staff have to remain for several minutes in close proximity to a pupil often face to face. A higher level of control is therefore needed. • PPE is required in these instances and should be provided in the form of a medical face mask and face shield • The first control measure is not to approach the person with symptoms if at all possible. • Disposable gloves should be worn • If people report to First Aid with COVID-19 symptoms, beyond testing temperature if needed, they should NOT be treated by First Aid but should be shown to the isolation room where they can be isolated until they return home. • They should be required to cover their mouths

					<ul style="list-style-type: none">• A contactless thermometer is available to take a temperature.• PPE will nevertheless be worn as described above. <p>PPE – please note:</p> <ul style="list-style-type: none">• PPE for the purposes of infection control in the form of gloves, face masks/respirators and face shields must be used with caution as cross contamination of the virus can occur with PPE if it is not used correctly• If disposable gloves are worn, change them frequently by removing them from the wrist and continue to wash your hands.• PPE face masks/respirators must be removed by the ear pieces/ties.• Face shields by the back of the securing band. In all cases avoid touching the front of the mask/shield which could be contaminated.• Always wash your hands after removing PPE• PPE can be a flawed control measure if used incorrectly. It
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					<p>relies on good fit and correct usage. It can itself become contaminated.</p> <ul style="list-style-type: none"> Do not let wearing PPE lull you into a false sense of security and avoid prolonged close, face to face contact as the control measure of first choice
<p>Nursery/Early years Potential for contracting COVID-19 via direct and indirect contact whilst attending school site</p>	<p>Staff, pupils and visitors</p>		X		<p>Nursery/Early Years:</p> <ul style="list-style-type: none"> Evidence shows that the risk of direct transmission is lower with young children. Nevertheless, due to the reduced capacity of younger children to follow hygiene norms and rules, indirect transmission risk may be slightly higher. <p>Therefore the following additional precautions over and above what is listed above should be employed:</p> <ul style="list-style-type: none"> More frequent hand washing should be undertaken by both staff and children – a suggested frequency is hourly. Model and supervise correct hand-washing. Staff should wear a disposable apron.

					<ul style="list-style-type: none">• Avoid/limit direct face to face contact at the level of the child.• If experience shows continued close contact with a child cannot be avoided, and there is a risk of coughs/sneezes being directed in the face, then PPE in the form of a face mask and face shield should be worn. However, the primary control is to avoid these situations in the first instance.• Intimate care of very young children must continue using established protocols. Robust hygiene controls are already established in this area..• ▪ A cleaner-sanitiser and a roll of blue paper towels should be available in the area for staff supervising young children so that obviously contaminated surfaces can be cleaned as required throughout the session as needed. This must be stored securely out of reach of the children concerned.• Limit the number of toys available so that their hygiene can be better maintained.
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					<p>Choose toys that are easy to clean.</p> <ul style="list-style-type: none"> • Avoid unnecessary sharing of equipment within class bubble and share no equipment across class bubbles.
<p>Lack of ventilation Potential for contracting COVID-19 via direct contact due to poor ventilation</p>	<p>Staff, pupils and visitors</p>	<p>X</p>			<p>Ventilation:</p> <ul style="list-style-type: none"> • Occupied teaching spaces to be ventilated by opening windows. • Doors into room can be propped open when the room is occupied but teaching staff must close these when the room is unoccupied. • Re-circulating only air-conditioning systems not to be used in place of open windows and fresh air ventilation.