



St James CE Primary School

COVID-19: Checklist & risk assessment

Corporate Health & Safety Unit



Introduction

It is important that school leadership make regular visits to the <u>Government website</u> that is aimed specifically at schools and other educational settings.

Guidance for full opening of schools

Safe working in education, childcare and children's social care

Face coverings in education

Actions for early years and childcare providers during the coronavirus (COVID-19) outbreak

Safe working in education, childcare and children's social care settings including the use of personal protective equipment (PPE)

https://www.gov.uk/government/publications/coronavirus-covid-19-contingency-frameworkfor-education-and-childcare-settings?utm_source=c2dc1d6f-6bed-49ab-9545-882df7da7598&utm_medium=email&utm_campaign=govuk-

notifications&utm_content=daily

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirusoutbreak

https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcareclosures

https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works#people-who-develop-symptomsof-coronavirus

https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works#people-who-develop-symptomsof-coronavirus

https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested

https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrenssocial-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-theuse-of-personal-protective-equipment-ppe

https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcaresettings

https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrenssocial-care

https://www.gov.uk/guidance/contacts-phe-health-protection-teams

https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/



https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance

https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremelyvulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerablepersons-from-covid-19

https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm

<u>https://www.gov.uk/government/publications/protective-measures-for-holiday-or-after-school-clubs-and-other-out-of-school-settings-for-children-during-the-coronavirus-covid-19-outbreak/protective-measures-for-out-of-school-settings-during-the-coronavirus-covid-19-outbreak</u>

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirusoutbreak?utm_source=1%20September%202020%20C19&utm_medium=Daily%20email%20C19&u tm_campaign=DfE%20C19

Checklist & Risk Assessment

This SSG comes in two distinct parts;

Checklist

<u>Part 1</u> is a "checklist" prompt form to assist schools in ensuring all health & safety issues have been considered prior to reopening of the premises. This should be completed prior to the risk assessment.

Further guidance on the statutory testing of plant & equipment can be found in the <u>school</u> <u>premise logbook</u>.

Template model risk assessment

<u>Part 2</u> is a template/model risk assessment that schools can adapt and adopt. As with all our model risk assessments, any red font will need to be read, amended where appropriate to ensure it is school specific.

Further guidance on the risk assessment process can be found in the <u>Risk Assessment</u> <u>SMP</u>.

Further information

If you require any further information, please contact the health & safety unit via our shared email address: <u>health_safety@sandwell.gov.uk</u>.





Part 2: Risk Assessment

Risk Assessment for: C	OVID 1	9			School: St James CE P	ost time							
Assessment Date:	7.7.2	0 Name of Assessor(s):	Camilla N	/IcC	Gregor, Chris Sale	Assessme	ent Ref No:	009					
Risk Matrix scoring g	uide:	Likelihood	S	eve	erity:								
		1 Very unlikely	1		No Lost time								
		2 Unlikely	2	I	Under 7-day injury or illnes	S							
		3 Likely	3	(Over 7-day injury or illness	(RIDDOR)							
		4 Very likely	4	•••	Specified injury or illness (RIDDOR)							
		5 Certain	5		Fatality, disabling injury or	illness							
High (15-25)													
Medium (5-12)		ditional control measures should be ide orkplace so far as reasonably practicab		imp	plemented to reduce the	risks associa	ted with the	activity or					
Low (1-4)		nimal control measures are required to risk control	be impleme	ente	ed to satisfy the level of	risk. Maintain	current arra	ngements					





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?		esidu sk rat		Date completed
		control systems in place)			L	S	R	
Lack of persons in safety critical roles (e.g. first aiders, fire marshals, etc) due to self- isolation and/or shielding.	Teaching, non- teaching staff, children, cleaners, cooks, parents, visitors, contractors Illness, infection, fatality	 Fire risk assessment kept under constant review. First aid needs assessment regularly reviewed. Staffing arrangements constantly under review. Where there is insufficient staff in safety critical roles, the decision will be made, alongside Public Health and Sandwell LA, of closing school. 	• Fire drill practiced on return to ensure school can be evacuated safely with new working arrangements. Practice throughout term.	HT –Sept 21	1	5	5	
Unable to socially distance and the virus is transmitted from person to person	Teaching, non- teaching staff, children, cleaners, cooks, parents, visitors, contractors Illness – coughs, high temperature and shortness of breath through to fatality.	 Where possible, adults to maintain distance from their pupils at the front of their class and avoid face to face contact and minimise time spent within 1m of anyone. Staff to maintain 2m distance from each other where possible, and especially so if not in regular contact. Clear signage to allow for "social distancing" space between pupils and adults during lessons wherever possible. 	 Staff to be informed regularly of this risk during Inset training and during regular staff meetings to ensure staff are being compliant. 	HT before return to school	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?		esidu k rat		Date completed
		control systems in place)			L	S	R	•
		 Assemblies to take place in phases to limit capacity in hall spaces. Children to eat lunch in classrooms (apart from Reception), to limit mixing of different year groups. Children in different year groups to have designated play areas. Parents/carers can only visit the school by appointment. SIPS kitchen staff to remain in kitchen area only and to use own facilities. Staff to wear face masks (preferably) or visors in communal areas (to be reviewed October). Parents encouraged to wear face masks when on school site. Staff with any vulnerabilities encouraged to wear masks within the classroom and maintain distance from other staff and children (separate risk assessments). 						





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is By Whet further action is By Whet further action is By Whet required?			esidu sk rat		Date completed
		control systems in place)			L	S	R	-
		 Staff room capacity reduced to enable social distancing whilst eating lunch. Staff to exercise caution when mixing with colleagues. 						
Lack of hand and respiratory hygiene	As above	 Limit the amount of equipment pupils bring into school each day Daily briefings during class 	 Regular checks made to ensure there is sufficient stock of soap. 	Staff with groups daily	2	4	8	
practices and/or facilities	Daily briefings during class assemblies to remind pupils of the importance of good hygiene practices.	 Regular checks made to ensure there is sufficient ABHR each day. 						
		• Ensure good respiratory hygiene - staff and pupils made aware of the "catch it, bin it, kill it" protocol via signage posters around the school.	 CO2 monitors will be provided to all state- funded education settings from September, so staff 	Andy T (site				
		 Posters displayed to promote correct handwashing technique. 	can quickly identify where ventilation needs to be	manager)				
		Clean hands thoroughly and more often than usual. improved. Further information will be issued as monitors are rolled						
		All toilets and handwashing stations have liquid soap available.	out.					
		 Additional hand hygiene stations with alcohol-based hand rub (ABHR) available at all entry points 						





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?		esidu sk rat		Date completed
		control systems in place)	•		L	S	R	•
		and other key areas around the school. Any entrance into a pod and on exit will have ABHR.						
		 Use of <u>e-bug</u> learning resources to promote and teach pupils the importance of good hygiene practices and washing for 20 seconds (regularly throughout the day). Enhanced/regular cleaning schedule in place that concentrates on common touch areas (e.g. door handles, bannisters, etc) 						
		 Additional cleaning of toilets throughout the day. Cleaner to come in and clean toilet areas and touch points. 						
		 Supply of detergent and/or antibacterial wipes available for adults and pupils to clean any areas/equipment they occupy/use before and after each use. 						
		Provide wipes/cleaning products for cleaning shared equipment after						





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?	Residual Risk rating			Date completed
		control systems in place)			L	S	R	
		 each use (printers, staff room equipment - kettles, toasters etc) Any contaminated waste (used tissues etc) is disposed of appropriately (double bagged and held for 72 hours prior to putting in the bin) and regularly taken away. Lidded bins to be used for this purpose. Doors to be propped open to reduce touching handles (NOT FIRE DOORS) Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and the staff working with them. Reminders to all not to touch nose, eyes, mouth, face. 				3	K	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?		esidu sk rat		Date completed
		control systems in place)			L	S	R	
Inability to maintain social distancing when dealing with accidents or personal care ie. nappies	Teaching, non- teaching staff, children Illness – coughs, high temperature and shortness of breath through to fatality.	 Windows and doors to be opened each morning in classrooms to allow for a free flow of fresh air. In cooler weather, windows should be opened just enough to provide constant background ventilation in the day and opened more fully during breaks to purge the air space. Safety of the injured/affected to be prioritised during incidents 2m social distancing is not required when attending to emergency situations People aiding others during an emergency should pay particular attention to sanitation immediately after the situation (washing hands). PPE to be worn by staff delivering first aid including face covering, plastic apron and gloves (including splash resistant visors if needed). 	 Ensure first aid areas are reviewed regularly and kept fully equipped Staff to be reminded about use of PPE regularly 	LB/CH weekly	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?		esidu sk rat		Date completed
		control systems in place)			L	S	R	
		 Member of staff to be allocated to come and support at as distance should they be required to help. Area to be thoroughly cleaned after. See the <u>COVID-19: cleaning of nonhealthcare settings guidance</u>. Where first aid has been administered, parents to be informed by email through Medical Tracker. Where a child has a toilet accident, staff supporting should wear gloves, apron and mask to disinfect the area. Soiled clothes to be double bagged and washed immediately or disposed of after 72 hours (if suspected of being infectious). 						
Child, young person, adult or other learner becomes unwell with symptoms of coronavirus	Teaching, non- teaching staff, first aider, etc Illness – coughs, high temperature and shortness of breath through to fatality.	Ensure that pupils, staff and other adults do not come into the school if they have <u>coronavirus (COVID-19) symptoms</u> , or have tested positive in the last 10 days. If anyone in school develops <u>COVID-19</u> <u>symptoms</u> , however mild, they should be sent home and they should follow public health advice.	 Ensure adequate stock of PPE and keep abreast of stock in school weekly <u>Book a test link</u> / <u>NHS</u> website link and <u>self</u> isolate guidance 	LB (Business Manager) weekly reviewed	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk control systems in place)	sk What further action is E	By Who and When?		esidu k rat		Date completed
and requires personal care.		If a child becomes unwell, they should be moved to the conference room and isolated behind a closed door (depending on age of child and needs.) A window should be	Contact Sandwell Public Health on phcovid19_enquiries@sa		L	S	R	
		child and needs.) A window should be opened for ventilation. Their temperature will be taken using a non-contact thermometer. Any rooms they use should be cleaned after they have left.	 ndwell.gov.uk 0121 569 4719 Contact DFE Helpline on 0800 046 8687 and select option 1 for advice. 					
		The government advise that PPE is only needed in a very small number of cases including:	use of PPE in education, childcare and children's social care settings guidance.					
		Additional PPE for COVID-19 is only required in a very limited number of scenarios:	https://www.gov.uk/government /publications/covid-19-personal- protective-equipment-use-for-					
		 if an individual child, young person or student becomes ill with COVID-19 symptoms and only then if close contact is necessary when performing aerosol generating procedures (AGPs) 	non-aerosol-generating- procedures					
		What PPE to wear when caring for a symptomatic individual?						





Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk control systems in place)	risk What further action is required?	By Who and When?		esidu sk rat		Date completed
	control systems in place)			L	S	R	
	 known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. 				5	ĸ	
h	armed and how?	armed and how? (Existing workplace precautions/risk control systems in place) Depending on how close you need be to an individual with COVID-19 symptoms you may need the following PPE: fluid-resistant surgical face masks (also known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or	armed and how? textsting workplace precations/risk control systems in place) required? Depending on how close you need be to an individual with COVID-19 symptoms you may need the following PPE: fluid-resistant surgical face masks (also known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or 	armed and how? textstring workplace precautions/risk control systems in place) required? When? 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Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spliting or Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for wearple, from coughing, spliting or Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for wearple, from coughing, spliting or wearple, from coughing, spliting or Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for wearple, from coughing, spliting or Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for Weare eye protection if a risk assessment dete	armed and how? texisting workplace precations/risk control systems in place) required? When? Depending on how close you need be to an individual with COVID-19 symptoms you may need the following PPE: fluid-resistant surgical face masks (also known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or Wear eye protection if a risk arisk of fluids entering the eye, for Wear eye protection if a risk 	armed and how? (existing workplace precautions/risk control systems in place) required? When? L S Depending on how close you need be to an individual with COVID-19 symptoms you may need the following PPE: • fluid-resistant surgical face masks (also known as Type IIR) • fluid-resistant surgical face masks (also known as Type IIR) • disposable gloves • disposable plastic aprons • eye protection (for example, a face visor or goggles) • How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. 1. A face mask should be worn if you are in face-to-face contact. 1. A face mask should be worn if you are in face-to-face contact. 2. If physical contact is necessary, then gloves, an apron and a face mask should be worn. 3. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or I	armed and how? texture required? When? L S R Depending on how close you need be to an individual with COVID-19 symptoms you may need the following PPE: fluid-resistant surgical face masks (also known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) How much PPE you need to wear when caring for someone with symptoms of COVID-19 depends on how much contact you have. A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, protection group ing, spitting or Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for A for the eye for A for eye protection if a risk <





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	vrisk What further action is required?		By Who and When?	Residual Risk rating			Date completed
		control systems in place)		•		L	S	R	•
		If a child needs the toilet whilst waiting to be collected, they should use a separate bathroom if possible and this should be thoroughly disinfected after.							
Lunch and break times mixing	Pupils, teaching staff, non-teaching staff, LTSs Illness – coughs, high temperature and shortness of breath through to fatality.	 Each year group will have an allocated time slot outside, using different playgrounds. Children to eat in classrooms apart from Reception. LTSs to collect lunches from serving hatch and deliver to classrooms. Regular cleaning of tables. Regular removal of waste food in lidded bins. Handwashing before and after eating at all times. 	•	Review working arrangements regularly.	HT wc prior to 1 st Sept Reviewed weekly	2	3	6	
Possibility of contamination due the virus being on surfaces/ shared equipment ie.	Teaching staff, non- teaching staff, LTSs Illness – coughs, high temperature and	• Staff to bring their own mug and utensils in for use in school. Where shared resources are used, these must be washed thoroughly after each use.	•	Regular replenishing of cleaning wipes and sprays. Staff to be informed regularly of this risk during Inset training and during regular staff	HT prior to Sept Continual	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	/risk What further action is required?	By Who and When?	Residual Risk rating			Date completed
		control systems in place)	•		L	S	R	•
staffroom, children's books	shortness of breath through to fatality.	 Staff must not leave their mugs and utensils in the sink. Resources that need to be shared to be cleaned regularly Cleaning materials supplied and expectation that staff are to wipe down any equipment they have used ie. kettle, boiler, photocopier, fridge handles, cupboard doors. Children to limit the amount of equipment they bring in daily to essentials: lunch box, coat, hat, books. Children to come dressed in PE kits on days they have PE to avoid mixing bubbles for children to get changed. 	meetings to ensure staff are being compliant.					
Risk to vulnerable staff/children of catching virus	Teaching staff, non- teaching staff, LTSs, children Illness – coughs, high temperature and	 Staff with any vulnerabilities to have individual risk assessment, including where a staff member is pregnant. Careful consideration to individual circumstances of each staff member. 	Communicate regularly to staff and parents that they must not bring children in if they are exhibiting symptoms.	HT prior to Sept and continually thereafter	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	what further action is By W required?			esidu k rat		Date completed
		control systems in place)			L	S	R	•
	shortness of breath through to fatality.	 Staff with more vulnerabilities, who will not be able to maintain social distancing at all times, to be given option of wearing faces masks should they wish. All staff or pupils with symptoms to engage with NHS Test and Trace process. If staff or pupil test negative they can return to work/school. If staff or pupil tests positive, then they should follow self isolation guidance for ten days. Ensure medical needs of children in classes are shared with staff and ensure adequate medication is in the correct location. Pregnant staff to have individual risk assessments (particular care when 28+weeks pregnant) and follow guidance from rcog.org. Pregnant staff to follow the guidance on social distancing 	 Contact Sandwell Public Health team and follow advice if needed. Pregnant staff made aware of <u>guidance and</u> <u>advice on coronavirus</u> (COVID-19) and <u>pregnancy from the Royal</u> <u>College of</u> <u>Gynaecologists</u>. <u>https://www.nhs.uk/condition</u> <u>s/coronavirus-covid-19/self-</u> <u>isolation-and-</u> <u>treatment/when-to-self-</u> <u>isolate-and-what-to-do/</u> Staff to be informed regularly of this risk during Inset training and during regular staff meetings to ensure staff are being compliant. 					





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk control systems in place)	What further action is required?	By Who and When?		esidu sk rat		Date completed
		 Keep mobile and hydrated to reduce the risk of blood clots in pregnancy <u>Stay active with regular exercise</u>, a healthy balanced <u>diet</u>, and folic acid and vitamin D supplementation to help support a healthy pregnancy Contact your maternity team if you have concerns about the wellbeing of yourself or your unborn baby 			L	S	R	
Staff member or pupil with confirmed diagnosis of virus attends the school rather than self isolating	Teaching staff, non- teaching staff, LTSs Illness – coughs, high temperature and shortness of breath through to fatality.	 HT will ensure staff follow current government guidance on isolation end will be sent home. Staff to take part in twice weekly LFD testing. Self isolation guidance No person displaying symptoms: cough, temperature, loss of taste to enter school. If symptoms present during school day, person to be isolated immediately. Individual to isolate for 10 days or until symptoms have subsided. All staff or pupils with symptoms to engage with NHS Test and Trace process. 	 Regular communication to parents that children should not attend school with symptoms. Advise parents of household LFD testing scheme. 	When required HT	2	3	6	





Hazard	harmod and how?			(existing workplace precautions/risk What further action is By Who and Risk rati					Date completed
		control systems in place)			L	S	R	•	
		 Staff and pupils with a positive LFD test result should self-isolate in line with the stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection. They will also need to get a free PCR test to check if they have COVID-19. Whilst awaiting the PCR result, the individual should continue to self-isolate. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms. 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 							





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk	What further action is required?	By Who and When?	d Residual Risk rating			Date completed
		control systems in place)			L	S	R	
		 they are not able to get vaccinated for medical reasons Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a <u>PCR test</u>. We would encourage all individuals to take a PCR test if advised to do so. When someone tests positive within class: close contact staff to increase LFD testing, wear face coverings and adhere to social distancing. increase ventilation further (if possible). lessen contact across school eg. do not attend face to face assemblies (as long as staff have been double vaccinated). 						
Risk of visitors/supply teachers and contamination	All staff and children Illness – coughs, high temperature and shortness of breath through to fatality.	 Where visitors must enter (eg social worker, parent, therapist) then hand gel must be applied prior to entry and on exit and 2m must be maintained wherever possible. All visitors to school will be asked to wear a face mask whilst on the premises (reviewed in October). 	 Expectations clearly communicated to visitors and parents 	Sept	3	3	9	





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		control systems in place)			L	S	R	-
		 All visitors to sign in on inventory system and contact details taken with sufficient detail to support rapid contact tracing if required by NHS Test and Trace. Perspect screen in school office 						
	 Perspex screen in school office Meetings with parents and other visitors to be done remotely where possible. Where face to face meetings take place, a room must be used to allow for 2m between each person and visitors to school wear a mask. Room must be well ventilated. Ensure seating position is sideways as opposed to face to 							
		 If supply teachers are being used, this should be done on a more consistent basis. 						
		• Volunteering can resume in if needed, with registers of contact.						
		• Stay and play sessions reintroduced in Early Years, with registers being taken and face coverings required.						





Hazard			By Who and When?		esidu sk rat		Date completed	
		control systems in place)			L	S	R	·
		 Further parent visits where distancing between parents/carers and children can be maintained will resume e.g. music performances. Face coverings required. 						
		 Possibility of further parent visits with larger groups of parents/carers (where distancing between adults/children can't necessarily be maintained) to be explored for Autumn 2 if possible e.g. Christmas Fair. 						
Potential cross contamination in breakfast	Staff taking clubs and children	 Breakfast club to be split into two smaller groups and to be kept separate in hall. 	 Reminders to parents not to send children in if symptomatic. 		3	3	9	
club and after school clubs	Illness – coughs, high temperature and shortness of breath	• Each child to be sat at a table using the dinner tables, an adequate distance apart.						
	through to fatality.	 No self-service of food. Food to be limited to cereals and bagels and staff to dispense to children whilst wearing gloves. 						





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk control systems in place)	What further action is required?	By Who and When?	d Residual Risk rating			Date completed
		control systems in place)			L	S	R	
	 Tables and areas to be cleaned thoroughly after use. Bagels through Magic Breakfast to be delivered to individual classrooms to be eaten in classrooms and tables wipe down afterwards. Adequate hand washing before and after eating. After school club groups to be kept as consistent as possible and outdoor space to be used as much as possible. External childcare providers eg Unicorns will be managed in the 							
Risk of heightened transmission through extra- curricular activities eg. music, PE	Staff, children Illness – coughs, high temperature and shortness of breath through to fatality.	 hall. Ensure good ventilation at all times and use rooms with higher ceilings or outdoors if possible. Avoid sharing of instruments. PE lessons to take place outdoors as much as possible or with good ventilation in halls. 	Swimming to be risk assessed individually following guidance from Swim England on school swimming and water safety lessons available at <u>returning to pools</u> <u>guidance documents</u>	All staff	3	3	9	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk (existing workplace precautions/risk) (existing workplace precautions/risk)					Date completed	
		control systems in place)			L	S	R	
Community Covid transmission rates rise significantly / enforced lockdown	Teaching staff, non- teaching staff, LTSs, parens/carers, pupils Illness – coughs, high temperature and shortness of breath through to fatality.	 Children to come wearing PE kits on days they have PE to avoid getting changed Equipment used in PE to be cleaned after each use. Handwashing before and after PE lessons. School's Covid Outbreak Management Plan to be followed when either of the following thresholds are met: There are 5 positive cases amongst pupils or staff who are likely to have mixed closely within a 10-day period 10% of pupils or staff who are likely to have mixed closely test positive within a 10-day period If COVID-19 infection rates in the community are extremely high, and other measures have failed to reduce transmission As part of a package of measures responding to a 'variant of concern' (VoC) To prevent unsustainable pressure on the NHS 	Share Covid Outbreak Management plan with staff. Alert parents of restrictions and actions for pupils who are CEV.	HT	4	3	12	





Hazard	Who might be harmed and how?	CONTROL MEASURES (existing workplace precautions/risk control suptome in place) (existing workplace precautions/risk (existing workplace precautions/risk) (existing workplace precautio						Date completed
		control systems in place)			L	S	R	•

Assessment reviewed [Date]:	Reviewed by [Name]:	Comments:
29 th June	Camilla McGregor	Slight adjustment made regarding testing and when to send a bubble home to isolate following a positive test only. Adjustment regarding visitors entering school. Most classrooms can safely fit in up to 10 children however adaption made to classrooms where 11 can be fitted due to space.
7 th July	Camilla McGregor	Changed due to full reopening guidance from September
18 th August	Camilla McGregor	Changed guidance: <u>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</u> Self-isolation advice for people who have tested positive/and or are experiencing symptoms has been increased to ten days.
4 th September	Camilla McGregor	Added info regarding visitors wearing face masks and external after school/ breakfast club provision: visitors on site to wear face masks. Information about when children wet/soil themselves.
11 th September	Camilla McGregor	Adaptations to drop off protocol.
17 th September	Camilla McGregor	Adaptions to how to respond to positive coronavirus case in school. Now to call DFE Helpline ad not Sandwell Public Health team.
28 th October	Camilla McGregor	Staff to wear masks/visors in communal areas.





		Parents to wear masks when on site for collection and drop off.
		Vulnerable staff to wear a visor throughout day.
		PE-use of hall updated to 15 at a time.
5 th November	Camilla McGregor	Changes in light of national lockdown
8 th December	Camilla McGregor	Additional measures re staff room use
2 nd January 2021	Camilla McGregor	Self isolation guidance for contacts changed from 14 days to 10. Adaptations in light of Sandwell being under tier 4 restrictions. Additional measures in case of contingency framework being implemented- <u>Contingency</u> <u>Framework for Education</u>
5 th January	Camilla McGregor	Adjusted measures in accordance with national lockdown and KW/vulnerable provision.
26 th February 2021	Camilla McGregor	Amended in light of Schools coronavirus (COVID-19) operational guidance being published and reopening of schools on March 8 th . Added information regarding pregnant staff and LFD testing for staff. Also, expectation that vulnerable staff wear masks as more protective than visors.
11 th July 2021	Camilla McGregor	Amended in light of ending of social distancing rules 19.7.21.
24 th August	Camilla McGregor	Updated in light of new School's Covid Operational Guidance.
2021		Face Masks to be warn in communal areas where distancing can't be achieved and will be reviewed in October.
		Bubbles no longer exist.