The Federation of Nettlestone and Newchurch Primary Schools

COVID 19 PROTECTIVE MEASURES RISK ASSESSMENT FOR FULL RETURN TO SCHOOL

Updated May 2021

FEDERATION OF NEWCHURCH AND NETTLESTONE PRIMARY SCHOOLS

This assessment enables the Federation to implement its recovery planning around a range of 'protective measures' for the full return of all pupils to school from Monday 8th March 2021.

All Federation staff will all have an opportunity to inform the successful implementation of recommended controls, mitigation and protective measures.

In recognition of the dynamic situation, this risk assessment will be reviewed or superseded where guidance from the government changes, or where improvements are required following implementation by the Federation at a local level however it is our intention to implement these measures further review barring necessity to change.

This assessment should be used alongside the government guidance below that was last updated on 6th April 2021:

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-coronavirus-covid-19-operational-guidance

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

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

https://www.gov.uk/government/publications/coronavirus-covid-19-contingency-framework-for-education-and-childcare-settings

This assessment has been shared with members of the Isle of Wight Health & Safety team who have advised that the Federation have taken good cognisance of the DFE guidance and have implemented appropriate control measures thereby advising that the level of risk as a result is low.

FEDERATION OF NEWCHURCH AND NETTLESTONE PRIMARY SCHOOLS

Risk Assessment	

Location / Site	Newchurch & Nettlestone Primary Schools
Activity / Procedure	Preparing for the full return to school for all pupils after the Easter holidays in line with guidance published 6th April 2021
Assessment date	8th April 2021 (Updated 29th April 2021)

Identify people at risk	YES or NO
Employees	YES
Children	YES
Visitors	YES
Contractors	Yes

Government guidance updated 26th March 2021 states:

From 8th March, all pupils should be attending school.

Public Health advice states 'Implementing the system of controls, creates a safer environment for pupils and staff where the risk of transmission of infection is substantially reduced. The way to control this virus is the same, even with the current new variants. We are further strengthening the measures, to provide more reassurance and to help decrease disruption the virus causes to education.'

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FEDERATION OF NEWCHURCH AND NETTLESTONE PRIMARY SCHOOLS

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

1) Lack of social distancing and preventative measures in the classroom resulting in direct transmission of the virus			

Existing level of risk	Consider current level of risk		
HIGH			

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Staffing levels will be a key component when determining how the school can continue to operate safely. In any period of high staff absence it may be necessary to implement a partial or full closure of a bubble. The level of staff available will determine the level of care and supervision the school can offer. Any changes will be communicated to parents as soon as practically possible
2. Communication to parents that all those that are unwell or self-isolating must stay at home and do not attend school.
3. Clinically extremely vulnerable pupils are advised to attend school unless they are one of the very small number of pupils under paediatric or other specialist care and have been advised by their GP or clinician not to attend.
4. In the event that a parent or carer insists on attendance at school even though the child has symptoms the school can take the decision to refuse the pupil, if it is felt that it is a necessary action to protect the pupils and staff from possible infection with coronavirus (COVID-19).
5. Creation of consistent bubbles of an appropriate size wherever possible to minimise contact between individuals and maintain social distancing wherever possible. Where practical to do so group size will be kept as small as possible by using available spaces within the school.
6. Bubbles should be kept apart from other groups where practical and possible to do so. Siblings are permitted to be in different groups.
7. Movement around the school site will be kept to a minimum.
8. Children within the bubble to clean hands thoroughly / use hand gel more often than usual including; when they arrive at school, return from breaks, change rooms and before and after eating.
9. Promotion of good respiratory hygiene by promoting 'catch it, bin it, kill it' approach within the bubble.
10. Children in our primary schools will not and should not be asked to wear a face covering.
11. Review of staffing structure to ensure risk of transmission reduced by limiting number of adult interactions with children within the pupil yet ensuring a broad and balanced curriculum. Staff are permitted to work across groups if needed for the purposes of specialist teaching, wraparound care and transport but this will be restricted wherever possible and practical to do so. Where staff need to move between groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults.
12. Lunchtime provision in classroom if necessary to avoid need for additional use of shared Hall spaces.
13. Staggered playtimes, supervised only by staff from bubble.
14. Identify outdoor space to be used exclusively by bubble to facilitate outdoor learning and adjust timetable accordingly.

15. Encourage use of creative outdoor learning solutions during this period to reduce number of children being taught inside the classroom.

16. Classrooms to be well ventilated. In cooler weather windows to be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space. Doors to be opened at breaktimes/ unoccupied periods to assist with ventilation as long as they are safe to do so. A comfortable teaching environment should be maintained as far as possible and practical. Heating will be used as necessary to ensure comfort levels maintained.

17. Any furniture rearranged to avoid direct draughts as a result of increased ventilation where practical and possible.

18. Wherever possible classrooms will be organised to support social distancing where possible.

19. Remove excess furniture to increase space if space to do so to enable promotion of social distancing.

20. Children to have key equipment on desk or close to had to minimise movement in classroom e.g. water bottle, stationary set etc

21. Social distancing charter created for and revisited often with the children –
(Include instructions how to line up, use of toilet, moving around the classroom, no touching of staff etc)

22. Charter re-visited and modelled many times a day and linked to school behaviour system – lots of praise for adherence and sanctions for non-compliance

23. Children spoken to if cannot adhere to charter and dealt with according to revised Behaviour Policy

24. Lessons planned for individual work (not pairings or group work in the first instance)

25. Where interventions need to be in place they should be only for children within the class and from an appropriate social distance.

26. Wherever practical staff to position at front, side or back of room.

27. It is recommended that staff wear face coverings only where they feel social distancing between adults is not possible e.g. when moving around corridors and communal areas and these are not necessary within the individual bubbles. Face visors or shields should not be worn as an alternative to face coverings as they are unlikely to be effective in reducing aerosol transmission when used without an additional face covering (a small contingency supply of face coverings will be available for those struggling to access a suitable face covering.) They should only be used after carrying out a specific risk assessment for the situation and should always be cleaned appropriately.

28. Feedback – using large whiteboard and visualizer and interactive whiteboard not close interaction – adults to be reminded that they should attempt to minimise contact within 1m of children and 2m of adults. If close feedback or communication needed – side to side not facing child.

29. Children to bring minimal items to school, coat, lunchbox, reading book and these will be stored in personal lockers/ on pegs. Only small groups to access lockers at a time. In KS2 personal pencil cases should contain minimal items and remain in school.

30. Children to have access to own stationary resources (pen, pencil, rubber, pencil sharpener) to avoid unnecessary sharing. Name labels to identify the designated user.

31. Although school uniform policy reinstated on allocated PE days children to wear PE to school to avoid need for changing and therefore opportunities to forfeit social distancing. Additional clothing is permitted and encouraged in the cooler months.

32. Activities such as assemblies, enrichment and celebratory events suspended until guidance suggests it is safe to do so to prevent large gatherings.

33. Ongoing open and honest communication with parents regarding the challenges of implementing social distancing, support requested in preparing pupils for a return to school

34. Reminder of fire route communicated to children and practice fire drill undertaken during first week back after Easter holidays to allow for social distancing.

35. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly

if guidance changes			

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	*Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards*

2) Lack of social distancing using toilets and poor hygiene resulting in direct and indirect transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Allocated toilet area highlighted for each bubble.
2. Children instructed, if cubicles are in use, to wait outside to maintain social distancing.
3. Hand gel used after toilet use as well as washing hands.
4. Extra signs in toilet area re washing hands.
5. Door hooks or wedges in place for the toilet external toilet doors if not fire doors to increase ventilation.
6. Extra soap ordered to ensure we do not run out.
7. Enhanced cleaning schedule in place including cleaning at lunchtime using standard products such as detergents and bleach as this is a shared area used by different groups.
8. Signage to identify handwashing protocols to serve as reminders - clean their hands on arrival at the setting, before and after eating, and after sneezing or coughing.
9. Lidded bin in each toilet base to support 'catch it, kill it, bin it' protocol.
10. Toilets to be well ventilated at all times.
11. Children taught to flush toilet with lid closed where lids are present.
12. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	*Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards*

3) Lack of social distancing waiting to enter classroom in morning resulting in direct transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add

	appropriate detail about the type and location of controls

1. Parents to be encouraged to walk/cycle/scoot with children to school as per government guidance and where it is safe to do so – further promote walking/ cycling/ scooting within curriculum focus.
2. School transport discouraged and school bus suspended where in use. If children do arrive by public transport and are aged 11 they should wear face coverings, be supported in their safe removal and handwash upon arrival. Face coverings should be kept in a sealed bag during the day.
3. No parents allowed on site without an appointment – drop off points promoted through school communication.
4. Parents encouraged to wear face coverings on drop off/pick if exiting their vehicle or walking to school. Communication of expectation to parents using private vehicle that single household use is preferable and that parents remain in their cars rather than congregate at the school gate.
5. Signage to promote walking route into school away from other class bases. The same access routes to be used as they were during the Autumn term for all class bubbles.
6. Instructions shared re social distancing between families in the morning with parents and children – markers to support social distancing on routes to classroom.
7. Staff on duty to supervise – it is recommended that face coverings be worn where social distancing between adults is not possible. Face visors or shields should not be worn as an alternative to face coverings as they are unlikely to be effective in reducing aerosol transmission when used without an additional face covering (a small contingency supply of face coverings will be available for those struggling to access a suitable face covering.)
8. Staggered drop off and pick up times remain in place for different year groups but with no impact on teaching time.
9. Breakfast club and wraparound care to remain in operation and accessible to all children without restriction.
10. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	*Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards*

4) Lack of social distancing during playtimes and lunchtimes resulting in direct transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Staggered playtimes and allocated play areas for each bubble to minimise contact between individuals and maintain social distancing wherever possible .
2. Only one bubble out to play at one time – one class on playground and one group on field where practical and possible – classes must remain separate at all times and class staff to supervise.
3. Reduced playtime equipment – items that of hard surface that can be easily cleaned allocated

for use by each bubble – age appropriate items.

4. Games discussed which encourage social distancing – no contact games permitted.
5. Staff supervision by staff within the bubble throughout – actively encouraging and modelling social distancing at all times.
6. Handwashing/ sanitising to take place before and after any playtime.
7. Outdoor gym/ adventure equipment should be allocated to a bubble on a rota basis for 1 week allowing 48 hours between groups.
8. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
5) Lack of social distancing when eating lunch resulting in direct transmission of the virus	

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Handwashing/ sanitising to take place, before and after eating.
2. Staggered lunchtimes for bubbles to avoid large gatherings, minimise contact between individuals and maintain social distancing wherever possible.
3. Ongoing liaison with Caterlink to ensure COVID secure operations.
4. School kitchen fully operational for hot meals (restricted menu) but suitable arrangements in place to enable bubble to eat within the classrooms where necessary thereby avoiding large gathering in main hall.
5. PPE will be worn by catering staff as directed by the catering contractor.
6. Adaptation of school menu to facilitate meals that can easily be transported e.g. avoidance of custard/gravy etc
7. Consideration of safe transportation of hot food to classrooms, to avoid strain or excessive effort from staff. Use of thermal food covers, meal trolleys, identification of quickest, socially distant route.
8. Ensure bubble staff feel competent and confident to support transit and delivery of hot food.
9. Consideration of utensils and crockery allocated to bubble for sole use of children within the bubble, although they will be cleaned through a dishwasher and therefore should be ok.
10. Provision of food waste bowl in classrooms for hot meal waste to be disposed of straight away after eating.
11. All surfaces to be cleaned after eating.
12. All packed lunch rubbish taken home in lunch box.
13. Free school meals will continue to be provided to pupils eligible for benefits-related free school meals and who are learning at home during term time.
14. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

6) Lack of social distancing in the corridors resulting in direct transmission of the virus

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Children staying in their class base and accessing from outside classroom door where possible
2. Only one child going to toilet at one time – different toilets allocated to each bubble wherever possible and practical – arrangements to be agreed with children concerning going and returning to toilet
3. Messages to office via classroom telephone – no child to be sent with a message.
4. Each class base to have access to basic first aid kit to avoid unnecessary pupil movement in the school.
5. Staff use empty classrooms and alcoves to maximise the distance between each other.
6. System for entry and exit into classrooms to be deployed to avoid congestion.
7. When moving class around the school – 1m+ metres between children – regular practice and reminding of this.
8. Corridors to remain well ventilated.
9. Staggered breaktimes and access routes to playground/field to avoid congestion in corridors
10. Use of shared spaces minimised e.g. Hall,
36. It is recommended that staff wear face coverings in areas where social distancing between adults is not possible (for example, when moving around the corridors and communal areas). Face visors or shields should not be worn as an alternative to face coverings as they are unlikely to be effective in reducing aerosol transmission when used without an additional face covering (a small contingency supply of face coverings will be available for those struggling to access a suitable face covering.)
11. Signage to promote social distancing on staircases i.e. no passing on stairs permitted.
12. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

7) Contact of shared resources resulting in indirect transmission of the virus

Existing level of risk	Consider current level of risk		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Children encouraged to clean hands thoroughly / use hand gel more often than usual including; when they arrive at school, return from breaks, change rooms and before and after eating.
2. Children allocated a pencil case with own stationary to use – no sharing of pencil case items. Children in KS2 can bring their own pencil case to school but this must remain in school and not be transferred between home and school.
3. Staff to have their own stationary items that are not shared.
4. Classroom based resources, such as books and games can be used and shared within the bubble, these should be cleaned regularly.
5. Tables, door handles and other frequently touched surfaces cleaned with anti-bacterial spray more often than normal.
6. Resources on tables ready for lesson and not distributed within the lesson.
7. Limited resources transferred between home and school – only necessity items e.g. water bottle, lunch box, reading book, hat, coat, books etc Small bags only are allowed.
8. Verbal feedback encouraged wherever possible, children to mark own work where they can to minimise contact points.
9. Pupils and staff are able to take books and other shared resources home but unnecessary sharing is to be avoided.
10. Resources that are shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles.
11. Outdoor equipment should be more frequently cleaned more often than normal this applies to resources used by wraparound care and out-of-hours settings.
12. All soft furnishings minimised as only those essential to the delivery of the learning objective.
13. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

8) Emotional distress of the children

Existing level of risk	Consider current level of risk		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Communication to advise that school attendance is mandatory. Education and Inclusion service may be contacted to support school attendance and re-engagement.

2. A very small number of children deemed clinically extremely vulnerable are advised not to attend school and will be in receipt of a clinician's letter. They should stay at home as much as possible until further notice. A copy of the letter sent to CEV children should be requested to verify the absence but no additional medical evidence is required. Remote education including pastoral support will be provided for those complying with government guidance and the absence will not be penalised. Pupils who live with someone who is CEV should continue to attend school as normal.

3. When a vulnerable child is required to self-isolate the social worker will be informed and an agreed support plan will be put in place.

4. Staff to take proactive approach with parents of children who identify specific risks e.g. those with certain conditions or cultural or heritage factors to ensure they can share safeguards and address any specific concerns that may be raised. A risk assessment may be co-produced with parents so that a personalised risk mitigation plan can be put in place that can be shared with parents prior to the child returning to school if felt to be appropriate.

5. Provision of more focused pastoral support where issues are identified that individuals may need help with including engagement with school nurse service.

6. 2 metre social distancing ELSA provision available for children who are distressed further support from Hants EP service if required

7. Promotion of Speak Out Stay Safe message

8. Circle time opportunities

9. Opportunities given for children to speak freely of their experiences of lockdown

10. Opportunities offered for children to speak 1:1 with a trusted adult should they feel they need additional support

11. Lesson content to be adapted to reflection social and emotional needs including revision of RSHE content to focus on the immediate needs of the pupils (importance of positive relationships, as well as mental and physical health.)

12. Follow safeguarding protocols to refer where new issues have arisen or existing concerns escalated

13. Trained DSL available at all times either on site or available to be contacted via phone to manage child protection and safeguarding concerns.

14. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

9) Emotional distress of the staff – including anxiety

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Involve staff in risk assessment process – input into hazard identification and control measures
2. Ongoing communication with staff to share plans and thought processes
3. Sharing of additional wellbeing resources including the Wellbeing for Education Return

materials and positive support offered regarding mental health and wellbeing for all staff supported by a nominated Governor.

4. Sharing of support helplines – HCC and others

5. Staff not to come into school if they have one of more coronavirus symptoms; a member of their household (including someone in their support bubble or childcare bubble if they have one) has coronavirus (COVID 19) symptoms; they are required to quarantine having recently visited countries outside the common travel area, they have had a positive PCR test or have been in close contact with someone who tests positive for coronavirus.

6. A staff member who has tested positive can return to their normal routine after they have finished their self-isolation and their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because the cough or anosmia can last for several weeks after the infection has gone. If they continue to record a temperature they will be advised to stay at home and seek further medical advice.

7. Staff may be redeployed and staff who are not teachers may be deployed to lead groups or cover lessons, under the direction of a qualified teacher.

8. At least one member of senior staff on site everyday for staff to share concerns with

9. Limited access to communal areas to minimise contact between individuals and maintain social distancing wherever possible. Visible signage in place to support these arrangements.

10. Cleaning products available to support wiping of shared resources after use e.g. photocopier, telephone, laminator etc

11. No shared workstations permitted in school offices or admin areas to minimise contact between individuals and maintain social distancing wherever possible.

12. Staff to use own personal stationary stocks – no shared pens etc

13. Staff can take books and other shared resources home although unnecessary sharing should be avoided.

14. Use of staff room and shared staff spaces to be minimised. Instead staff bases created for each individual bubble where practical and possible to do so to avoid mass use of staffroom during breaktimes. Only staff working within the bubble permitted to access staff base during allocated break times.

15. Time for planning and preparation within the week identified

16. Staff needing to work across the Federation to minimise points of contact to reduce risk of transmission and implement social distancing within shared work spaces where practical and reasonable to do so.

17. Where a role is conducive to home working this will be considered where feasible and appropriate.

18. Staff who have been alerted that they are at high risk and are deemed clinically extremely vulnerable from COVID-19 are now able to attend the workplace but must continue to follow the rules in place for everyone under current national restrictions. Communication will ensure that all impacted feel happy and supported to do so prior to their return.

19. Pregnant women or those that are breastfeeding will be identified as clinically vulnerable will be subject to individual risk assessment and may be required not to attend the workplace.

20. Staff who live with those who may have comparatively increased risk from coronavirus (COVID-19) can attend the workplace where it is not possible to work from home and are encouraged to discuss their unique position with school leaders.

21. Governors should have regard to staff well being, work-life balance and workload including that of the Headteacher and staff workload will be monitored throughout this period.

22. Staff who feel that they may be at increased risk are encouraged to discuss their concerns and the school will do all that is practically possible to accommodate additional measures where appropriate.

23. Increased access to online training/meetings to be implemented to facilitate staff working/training from home and supporting staff well-being and avoid unnecessary time on site.

24. Student teachers or work placements to be allocated to one bubble only and work within the

remit of the bubble and will be offered LFD tests in line with other staff members.

25. Adults working in regulated activity (e.g. peripatetic teachers, sports coaches etc) permitted in school and supported with a strict risk assessment.

26. Volunteers are not encouraged on site but may assist from home if there is a need to do so.

27. Staff to make school leaders aware of any travel plans or leave arrangements that could cause disruption due to quarantine arrangements upon return.

28. Staffing levels will be a key component when determining how the school can continue to operate safely. In any period of high staff absence it may be necessary to implement a partial or full school closure if it is felt that safe ratios cannot be met. The level of staff available will determine the level of care and supervision the school can offer. Any changes will be communicated to parents as soon as practically possible

29. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

10)   Risk of spreading virus due to close contact with children – 1:1 and intimate care resulting in direct transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. SENCO to maintain communication with families with children supported by EHCP and identify/implement any reasonable adjustments necessary prior to the return to school.

2. Individual risk assessments produced by SENCO identifying additional hazards due to behaviours that may present challenge e.g. spitting, biting etc

3. Staff working with pupils who spit uncontrollably or use saliva as a sensory stimulant will have increased opportunities to wash their hands than other staff and should wear any PPE that would be routinely worn.

4. If a pupil has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used. Additional PPE has been purchased and should be used only when a pupil becomes ill with coronavirus symptoms and only then, if a 2 metre distance cannot be maintained.

5. First aid to be administered side by side, using verbal instructions wherever possible wearing gloves and within the Bubble area.

6. Revised addendum to Positive Behaviour Policy to ensure all aware of sanctions if children are acting in a way staff are put at risk.

7. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

11) Risk of spreading virus due to poor hygiene resulting in indirect transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Additional handwashing facilities installed on external walls to promote handwashing at entry and exit points
2. Additional hand sanitiser dispensers outside of all classrooms – very young children supervised with use of hand sanitiser to avoid ingestion or hand wipes used as an alternative.
3. Hand sanitiser ordered in large quantities
4. Extra soap dispensers situated in each classroom
5. Children handwash or hand gel on entry to school, before break, after break, before lunch, after lunch, leaving school, using the toilet and any time they cough or sneeze
6. Washing hands posters shared in all washing areas
7. Reminders/ models of how to wash hands thoroughly – videos and posters promoting how to wash hands with soap and water for 20 seconds and dry thoroughly
8. Children encouraged not to touch their mouth, eyes and nose
9. Tissues supplied in each class base to promote 'Catch it, Kill it, Bin it' routine.
10. Lidded bins purchased for all areas and emptied more frequently than normal to prevent infection transmission.
11. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

12) Risk of infection due to lack of cleaning resulting in indirect transmission of the virus

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. All frequently touched surfaces, handles, toilets and shared equipment will be cleaned more frequently than normal each day using anti bacterial cleaner.
2. Enhanced cleaning schedule to be maintained.
3. PPE will be worn by cleaning staff as directed by the cleaning contractor.
4. Some resources will be rotated and left to de-contaminate for 72 hours after cleaning to reduce the risk of indirect transmission
5. Soft furnishings and soft / cloth toys / items that cannot be cleaned easily (e.g. sand) will be minimised in classrooms as to only those essential for curriculum delivery.
6. Displays to be designed to engage and support learning but not encourage touch or physical interaction.
7. Thorough cleaning of each room at the end of each day and toilet facilities cleaned during the day. Additional 'fogging' of classrooms to take place each Friday.
8. All cleaning to adhere to published government guidance – COVID-19: cleaning of non-healthcare settings.
9. Cleaning box allocated for each bubble
10. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	**LOW**	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

13)   Risk of illness of vulnerable staff and family members through direct and indirect transmission of the virus

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Staff who have been alerted that they are at high risk and are deemed clinically extremely vulnerable from COVID-19 are now able to attend the workplace but must continue to follow the rules in place for everyone under current national restrictions. Communication will ensure that all impacted feel happy and supported to do so prior to their return.
2. Pregnant women or those that are breastfeeding will be identified as clinically vulnerable will be subject to individual risk assessment and may be required not to attend the workplace.
3. Staff who live with those who may have comparatively increased risk from coronavirus (COVID-19) can attend the workplace where it is not possible to work from home and are encouraged to discuss their unique position with school leaders.
4. Governors should have regard to staff well being, work-life balance and workload including that of the Headteacher
5. Staff identified as vulnerable will be offered the opportunity to create an individual risk assessment to ensure that they feel confident and safe in the workplace.
6. Staff and other adults must cease to attend for at least 10 days from the day after the start of any symptoms linked to coronavirus or the date of their test if they did not have symptoms but have had a positive test (whether this was a Lateral Flow Device (LFD) or Polymerase Chain

7. Anyone in school developing symptoms (new or persistent cough or a high temperature, or has a loss of or change in, their normal sense of taste or smell (anosmia)) during the school day will be sent home to begin isolation – the isolation period includes the day the symptoms started and the next 10 full days.

8. Staff testing positive but not displaying symptoms should not come to school and should self-isolate as described above. Should symptoms develop during the isolation period the 10-day isolation period should restart from the day they develop symptoms.

9. Household members (including siblings and members of their support or childcare bubble if they have one) should self-isolate from when the symptomatic person first had symptoms or the day the test was taken (whether this was an LFD or PCR test) if they did not have symptoms and include the next 10 full days.

10. Any member of staff who has provided close contact care to someone with symptoms do not need to go home to self-isolate unless; the symptomatic person subsequently tests positive, they develop symptoms themselves – in which case they should self isolate immediately and arrange a test, they are requested to do so by NHS Test and Trace or the Public Health England advice service or they have tested positive from an LFD test as part of our school testing programme.

11. A pupil or staff member who has tested positive can return to their normal routine after they have finished their self-isolation and their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because the cough or anosmia can last for several weeks after the infection has gone. If they continue to record a temperature they will be advised to stay at home and seek further medical advice.

12. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

14) Risk of transmission after a child falls ill with symptoms within school

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Communicate to families that it is a statutory requirement that in the event of symptoms that they are ready and willing to; book a test, provide details of anyone that they have been in close contact with if they test positive and self-isolate.

2. Provide community with information regarding how to book a test and ensure that supply of PCR tests in school is maintained to be used in the exceptional circumstances that an individual becomes symptomatic and they may have barriers to accessing testing elsewhere.

3. Staff informed and asked to remain alert of the symptoms of possible coronavirus infection e.g. new or persistent cough or a high temperature, or has a loss of or change in, their normal sense of taste or smell (anosmia) and will be informed if any other symptoms are added to the list.

4. Temperatures continue to be taken upon arrival and any above 37.8° will be sent home immediately.

5. Identification of well-ventilated area in the school that can be used as a quarantine space should a child fall ill. Any pupil who displays signs of being unwell immediately referred to a member of staff. Child awaiting collection to be isolated immediately behind a closed door, depending on the age and needs of the pupil, with appropriate adult supervision if required. Should the space not be accessible when required or if it is not possible to isolate the child, move them to an area which is at least 2 meters away from other people preferably outside.

6. Windows should be opened for fresh air ventilation, if it is safe to do so, in the quarantine area and rearrange furniture to avoid direct draughts where practical and possible.

7. Ensure parents called immediately and asked to collect child and ensure that parents are aware of this expectation. 999 will be called if someone is seriously ill or their life is at risk.

8. PPE (face mask, apron, gloves and mask) available for staff providing supervision in the identified quarantine space if a distance of 2 meters cannot be maintained (such as for very young children or a child with complex needs). Staff requested to revisit training materials for donning and doffing PPE appropriately.

9. Appropriate signage in quarantine area to provide visual reminder to staff that 2m social distance needs to be maintained.

10. Separate toilet facilities to be used by person exhibiting symptoms if required and to be cleaned and disinfected before being used by anyone else.

11. Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after contact with someone who is unwell.

12. The area around the person with symptoms must be cleaned after they have left to reduce the risk of potentially passing the infection to others e.g. isolation room cleaned and disinfected as soon as child collected.

13. Ensure staff in school understand the NHS Test and Trace process and how to contact local Public Health England protection team.

14. Schools to ask parents to inform immediately the results of the test as if positive to support NHS Test and Trace protocols. No physical evidence of a negative test result or other medical evidence will be requested before readmitting children or welcoming them back after a period of self-isolation.

15. Further advice to be taken from Public Health England on further managing the case.

16. Any member of staff who has provided close contact care to someone with symptoms do not need to go home to self-isolate unless; the symptomatic person subsequently tests positive, they develop symptoms themselves – in which case they should self isolate immediately and arrange a test, they are requested to do so by NHS Test and Trace or the Public Health England advice service or they have tested positive from an LFD test as part of our school testing programme (a negative PCR test is required before they can return to work should this be the case.)

17. A pupil or staff member who has tested positive can return to their normal routine after they have finished their self-isolation and their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because the cough or anosmia can last for several weeks after the infection has gone. If they continue to record a temperature they will be advised to stay at home and seek further medical advice.

18. In the event that a parent or carer insists on an early return to school the school can take the decision to refuse the pupil, if it is felt that it is a necessary action to protect the pupils and staff from possible infection with coronavirus (COVID-19).

19. For individuals or groups of self-isolating pupils and pupils who are shielding following government advice, remote education plans will be put in place. These will meet the same expectations as those for pupils attending school.

20. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes.

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Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	**LOW**	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

15) Risk of transmission following planning of school based activities.			

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Breakfast club and after school educational activities will be provided.   Where practical and possible provision will take place within the bubbles only to ensure consistent bubble groups throughout the day.
2. Parents advised to limit their use of multiple out-of-school settings where practical and possible to do so.
3. Educational day visits will resume after 12th April and will be undertaken in line with relevant coronavirus (COVID-19) secure guidelines and regulations in place at this time. No educational overnight residential opportunities will be offered.
4. Visiting curriculum specialists and their proposed activities will be individually risk assessed prior to coming onto the school site.
5. A record will be kept of all visitors with sufficient detail to support rapid contract tracing if required by NHS Test and Trace.
6. Assemblies will take place in class bubbles to avoid large gatherings.
7. Celebration Assemblies will continue to be remote but will seek to continue to celebrate success with the wider community.
8. School calendar reviewed to provide alternatives to established activities that require close contact e.g. mentoring meetings, class assemblies etc. Creative solutions to be used.
9. PE lessons to be prioritised outdoors as much as possible – staff allocated to each bubble to provide high-quality PE as long as 2m social distance can be maintained at all times. No access to changing rooms. Only sports whose national governing bodies have developed guidance and approved by the government are permitted.
10. External coaches, clubs and organisations will be used only if school is satisfied that it is safe to do so.
11. Sports competitions/fixtures between schools will only take place outdoors until wider indoor grassroots sports for under 18's is permitted.
12. School will continue to promote physical activity whilst encouraging physical distancing via weekend challenges, active mile etc.
13. School choir will be suspended as singing, wind and brass playing should not take place in larger groups. Playing instruments and singing in groups should take place outdoors wherever possible and pupils should be positioned back-to-back or side-to-side when playing or singing (rather than face to face) where possible.
14. The sharing of musical instruments should be avoided wherever possible and hands should be washed before and after handling equipment. Instruments should be cleaned by the pupils using them where possible.

15. No performances with audiences are permitted.
16. Any activities involving shouting should not take place and microphones should be used if voice projection required.
17. Any meetings/ adult gatherings/ adult based events (either indoors or outdoors) should be individually risk assessed and take place virtually wherever possible.
18. Visitors strictly only permitted on site if their work directly impacts on positive outcomes for children e.g. specialists, therapists, clinicians, sports coaches, all other visits to be undertaken remotely or out of school hours including contractors and deliveries where possible to do so to minimise contact between individuals and maintain social distancing.
19. It is recommended that visitors wear face coverings (not visors) should they not be able to maintain social distancing between adults and all will be informed of the processes for entering the site regarding symptoms, quarantine and positive test results at the point of signing in if not before arrival. A small contingency supply of face coverings will be available to support visitors struggling to access a suitable face covering.
20. Visitors should ensure that they minimise contact and maintain as much distance as possible from other staff and wear any necessary PPE for their role. Where practical and possible a separate risk assessment will be provided for their visit.
21. A record will be kept of all visitors with sufficient detail to support rapid contract tracing if required by NHS Test and Trace.
22. School facilities will not be available for external hire until government guidelines permit.
23. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

16)   Risk of mismanagement of school premises when preparing for full re-opening

Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Identified members of staff for managing premises, reviewing risk assessments and implementing any measures to ensure that safety is maintained for wider opening (KJH/LP/AJ/RP/GF/GA).
2. Routine flushing as advised of all the cold water systems and domestic hot water services.
3. Seek advice from legionella competent person who will advise on the action required if any
4. Contact persons responsible for drinking water dispensers to ensure that all remain safe to use and water is safe to drink.
5. In the event that water is not safe to drink bottled water will be provided.
6. Ensure all classroom have access to hot water feed for handwashing and soap dispenser.
7. Water temperatures must be kept within limits recommended for the control of legionella

bacteria in water systems.

8. Regularly check hot water generation for functionality and if required, temperature recording.
9. Ensure availability of soap and hot water in every toilet and any areas used for personal care of pupils eg changing
10. Purchase of hand sanitiser in all classrooms and for regular passing/access points
11. Purchase of lidded bins for all classrooms and for other key locations around the site for the disposal of tissues and any other potentially infected waste.
12. Purchase of plentiful supply of disposable tissues in each classroom and communal areas
13. Systems in place to coordinate emptying of bins and safe waste disposal at lunchtime as well as at end of day.
14. All hand dryers disconnected to prevent unnecessary distribution of bacteria in the air.
15. Checks made that all areas are well ventilated and that windows are operational.
16. Promotion of natural ventilation via windows or vents to be used as far as possible and where available occupied room windows should be open although a comfortable teaching environment should be maintained. Heating will be used as necessary to ensure comfort levels maintained.
17. Any furniture rearranged to avoid direct draughts as a result of increased ventilation where practical and possible.
18. Before re-opening check all fire doors are operational and fire alarm system and emergency lights have been tested and are fully operational.
19. During week 1 of Summer term complete fire drill with appropriate social distancing.
20. Before re-opening and during opening ensure new cleaning arrangements in line with coronavirus preparations should include regular systematic checks on drainage systems (check traps have not dried out and ensure water seals are in place to prevent smells within the building, for example, accessible toilet areas) and where toilets are put back into use ensure the flushing of the toilets occur with the lids down and toilet ventilation systems are working
21. Ensure all cleaning is undertaken in accordance with COVID secure guidance
22. Provision of cleaning materials and gloves for each bubble to prevent cross-contamination and facilitate immediate cleaning of surfaces impacted by coughs/sneezes etc
23. Liaise with Caterlink to ensure all cleaning and kitchen management processes are in line with COVID-19 secure guidance
24. Ensure adequate signage to publicise social distancing rules around the site.
25. Demarcation of 2m social distance lines on school frontage and approaches to school entry points.
26. Allocation of outside space to each identified bubble with demarcation of zones as required.
27. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards		
17) Risk of mismanagement of remote learning			
Existing level of risk	Consider current level of risk		
HIGH	MEDIUM	LOW	NEGLIGIBLE
Control measures	List your control measures required to reduce risk – add		

	appropriate detail about the type and location of controls

1. Identification of a senior leader to be responsible for the quality and delivery of any necessary remote education and to ensure that provision meets expectation (AJ/LP).
2. Secure and suitable platforms identified (SeeSaw/Tapestry) for the children's age group, stage of development and ability. School and parent accounts created as part of the platform.
3. Staff training on appropriate, practical and safe use of the learning platform.
4. Creation of remote learning plan to communicate all expectations regarding remote curriculum access during the period where remote learning is required i.e. length of learning, expectations for engagement and types of delivery etc
5. Preference for recorded learning and not provision of 'live lessons' as an additional safeguard and support of staff wellbeing and workload. Resource banks of recorded material to be signposted to assist staff with planning e.g. Oak National Academy.
6. Reasonable access arrangements to be put in place for children identified as SEND, for children of an age that may require high levels of adult support or for families that are facing difficulties due to illness.
7. Weekly safety reminders shared in the newsletter regarding online safety protocols and arrangements.
8. Ongoing communication with all stakeholders involved in remote learning to facilitate swift resolution to any issues raised that may cause additional anxiety for those involved.
9. Continued staff adherence to Code of Conduct regarding behaviour and conduct whether online or in the real world.
10. Contact arrangements for welfare calls in place should they be required, it is preferred that these are undertaken using a school device.
11. Loan agreement in place to support provision of school devices where there is lack of access at home and necessity dictates a period of remote learning is required.
12. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

18)   Risks associated with Primary COVID testing.

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Primary age pupils will not be tested with LFDs.
2. Each school will identify a member of staff to act as School Testing Co-ordinator.
3. All testing kits will be stored safely and securely in a designated area, at room temperature (15-30 degrees) and unauthorised access will be prevented.
4. Staff given access to DfE resources in advance of start of testing regime to inform them about the LFD testing procedure and enable them to decide whether they wish to participate in the

voluntary process as outlined.

5. Only those staff agreeing to participate will be provided with testing materials but staff will be notified of the option to 'opt in' to the testing regime at anytime. It is recognised that the more staff that can be tested the more likely the identification of asymptomatic cases.

6. Additional published materials shared with those participating to ensure process involved clearly explained to avoid risk of misinterpretation of result or process involved.

7. All tests to be distributed in a named plastic wallet in line with COVID safe procedures.

8. Staff allocated only a specific number of tests (in line with DfE guidance) and told that they are for staff use only. Staff asked to sign to confirm that they have received tests and read and understood associated protocols for administration.

9. Staff asked to test preferably on a Sunday and Wednesday evening following the advice that tests should be taken 3-4 days apart (alternative of Monday and Thursday morning prior to 7.30am to be offered).

10. Staff advised that a positive LFD result should be followed up with a PCR test. If the PCR tests negative the staff member can return to work.

11. Identification of close contacts should any staff member test positive. A contact can be:

*   anyone who lives in the same household as someone with COVID-19 symptoms or who has tested positive for COVID-19

*   anyone who has had any of the following types of contact with someone who has tested positive for COVID-19 with a PCR test:

*   face to face contact including being coughed on or having a face to face conversation within one metre (where they are not in the same bubble).

*   been within one meter for one minute or longer without face –to-face contact.

*   been within 2 meters of someone for more than 15 minutes, either as one-off contact, or added up together over one day (where they are not in the same bubble)

*   travelled in the same vehicle or a plane

*   sexual contacts

An interaction through a Perspex (or equivalent) screen with someone who has tested positive for COVID-19 is not usually considered to be a contact, as long as there has been no other contact such as those in the list above.

12. It is expected that all staff report LFD results in accordance with DfE guidance and make the schools aware immediately of their result via the reporting mechanism established. Staff will be challenged where they have 'opted in' but no result offered within stipulated timeframe.

13. Bubbles will be closed after a positive LFD to protect potential risk to children and staff. Should PCR return a negative result the bubble and staff member can return.

14. A staff member that records two void tests should seek a PCR. Bubbles will not be closed in this circumstance until the PCR test result is returned. A staff member with 2 void results who does not wish to take a PCR is advised to self-isolate for 10 days.

15. A staff member that records a positive or two void tests will need to inform their Head of School by telephone and seek advice.

16. School will follow the Hampshire Local Authority suggestion that staff that have previously tested positive for coronavirus (and who may still have a prevalence of the virus yet not be infectious) start LFD tests 28 days after the initial positive test result. This is a balanced approach i.e. more than the 10 day isolation period but less than the maximum 90 days as indicated in some guidance.

17. School will follow Public Health advice in the event of positive cases and take all necessary actions as per advice.

18. School will monitor level of tests available for distribution and order more as necessary to maintain continual stock level.

19. Risk assessment to be shared with all staff that have 'opted in' and feedback requested.

Remaining level of risk	Consider level of risk following use of control measures

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HIGH	MEDIUM	LOW	NEGLIGIBLE

Identify hazard	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards

19) Risks associated with use of the NHS COVID-19 app in education and childcare settings.

Purple text indicates direct guidance taken from 'Use of the NHS COVID-19 app in Education and Childcare Settings – Nov 2020'

Existing level of risk	Consider current level of risk

HIGH	MEDIUM	LOW	NEGLIGIBLE

Control measures	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. In line with Federation policy on mobile phones primary aged students should not have a phone about their person and therefore should not receive a notification during the day that they have come into contact with a positive test result. Parents will be reminded about the mobile phone policy and the restricted items that should not be coming into school at this time.
2. Staff will be alerted to the app and advised that they are able to use the app as an additional track and trace measure.
3. Staff will be advised that it is possible to pause the contact tracing function ('trace') in the app. If it is paused, the phone and Bluetooth remain on but the phone does not record contacts. Pausing contact tracing is recommended by the DfE when an individual is not able to have their phone with them, for example because it is stored in a locker or communal area – this is to avoid the app picking up contacts when the individual is not with their phone.
4. As the staff code of contact does not permit staff to have mobile phones out whilst in the presence of the children it is strongly recommended that the contract tracing function is paused whilst in school (to avoid misidentifying close contacts) or that mobile phones are switched off in school.
5. Staff will be reminded that use of the app does not replace the need for individuals to social distance or to report a positive case to the setting. Neither does the app change the processes of escalation if there are any positive cases linked to the school including the engagement with and response to the advice given from local health protection teams and wider test and trace processes.
5. If a staff member receives a notification, they should inform the Head of School/ Executive Head before self isolating.
6. Should a number of staff receive a notification at the same time in school via the app the school will take further advice from the local health protection team regarding the level of further action needed.
7. The schools will create a NHS QR poster but staff should not use this facility to 'check-in' rather usual signing in protocols should be used. The QR code should only be used in the rare instance that visitors are on site or parents are invited to attend appointments during the remainder of the school year.
8. Request feedback from staff on success or otherwise of measures and refine/adapt accordingly if guidance changes

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

APPENDIX 1

GOV.UK
Coronavirus (COVID-19)

What you need to know – cleaning in non-healthcare settings

- cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people
- wear disposable or washing-up gloves and aprons for cleaning. These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished
- using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles
- if an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), use protection for the eyes, mouth and nose, as well as wearing gloves and an apron
- wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning

Background

Experience of new coronaviruses (SARS-CoV and MERS-CoV) has been used to inform this guidance. The risk of infection depends on many factors, including:

- the type of surfaces contaminated
- the amount of virus shed from the individual
- the time the individual spent in the setting
- the time since the individual was last in the setting

The infection risk from coronavirus (COVID-19) following contamination of the environment decreases over time. It is not yet clear at what point there is no risk. However, studies of other viruses in the same family suggest that, in most circumstances, the risk is likely to be reduced significantly after 72 hours.

Principles of cleaning after the case has left the setting or area
Personal protective equipment (PPE)

The minimum PPE to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) is disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.

If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where unwell individuals have slept such as a hotel room or boarding school dormitory) or there is visible contamination with body fluids, then the need for additional PPE to protect the cleaner's eyes, mouth and nose might be necessary. The local Public Health England (PHE) Health Protection Team (HPT) can advise on this.

Non-healthcare workers should be trained in the correct use of a surgical mask, to protect them against other people's potentially infectious respiratory droplets when within 2 metres, and the mask use and supply of masks would need to be equivalent to that in healthcare environments.

Cleaning and disinfection

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 can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids
- all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

- use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

  or

- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants

  or

if an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses

Avoid creating splashes and spray when cleaning.

Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.

When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.

Laundry

Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.

Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

Waste

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

1. Should be put in a plastic rubbish bag and tied when full.
2. The plastic bag should then be placed in a second bin bag and tied.
3. It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.

- if the individual tests negative, this can be put in with the normal waste

- if the individual tests positive, then store it for at least 72 hours and put in with the normal waste

If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.

Appendix 2
Symptoms of Covid-19

Respiratory Symptoms

Sore throat, runny nose, loss of smell, cough, sputum

Coughing up blood

Shortness of breath

Low oxygen levels

pneumonia, acute respiratory distress

Systemic Symptoms

Fever, headache, fatigue, confusion, seizures

Chest pain, joint & muscle aches

Acute cardiac injury

Vomiting, abdominal pain, Diarrhoea

Rash and swollen glands