

## Wilby CE VA Primary School

### Covid-19 Risk Assessment for Schools (Written 17<sup>th</sup> August 2021)



Added to on 31.08.2021 Reviewed 25.10.2021

The technical name of the virus that causes COVID-19 is severe acute respiratory syndrome coronavirus 2, abbreviated as **SARS-CoV-2**

Whilst the Covid-19 virus can cause serious illness, especially for vulnerable adults with underlying health conditions evidence suggests that for the majority (particularly children and young people) they will experience a mild to moderate illness.

DFE guidance states, “The government continues to manage the risk of serious illness from the spread of the virus. Step 4 marked a new phase in the government’s response to the pandemic, moving away from stringent restrictions on everyone’s day-to-day lives, towards advising people on how to protect themselves and others, alongside targeted interventions to reduce risk. As COVID-19 becomes a virus that we learn to live with, there is now an imperative to reduce the disruption to children and young people’s education - particularly given that the direct clinical risks to children are extremely low, and every adult has been offered a first vaccine and the opportunity for 2 doses by mid-September.

This risk assessment is based on the guidance “Schools COVID-19 operational guidance” <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance> and the Contingency framework: education and childcare settings <https://www.gov.uk/government/publications/coronavirus-covid-19-local-restrictions-in-education-and-childcare-settings/contingency-framework-education-and-childcare-settings>

Potential Hazard	Risk	Who might be harmed?	Minimum control measures to reduce risks to an acceptable level
Covid-19	Staff not having appropriate knowledge on virus, transmission and risk leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public	<p>All staff to keep themselves updated and follow the latest DfE. guidance for schools and national Public Health England/NHS guidelines via <a href="https://www.gov.uk/coronavirus">https://www.gov.uk/coronavirus</a></p> <p><a href="https://www.nhs.uk/conditions/coronavirus-covid-19/">https://www.nhs.uk/conditions/coronavirus-covid-19/</a></p> <p>In particular staff should be familiar with the schools operational guidance – Schools coronavirus (Covid-19) operational guidance.</p> <p><a href="https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance">https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance</a></p> <p>This was last updated on <del>17<sup>th</sup> August 2021.</del> 27<sup>th</sup> September 2021.</p> <p>The Head will provide staff with updates as and when they are released.</p>
Covid-19	Contagious people coming into school leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public, Pupils	<p>Primary schools distribute LFT kits to their staff. In all cases the participation in testing is an individual decision.</p> <p>To help ensure that the risk of virus spread is as low as possible, the school will inform staff and potential visitors, including customers and contractors, not to enter the school if they are displaying any symptoms of coronavirus (COVID-19) or if they should be self-isolating.</p> <p>Anyone showing the symptoms (new continuous cough and/or a high temperature or loss of taste and smell) should not come to work, obtain a test, and should follow the relevant government protocols at home and before coming back to work, this will last at least 10 days from the day after displaying symptoms or receiving a positive test.</p> <p>Process for collecting a child due to illness or an existing appointment during the school day is established and shared.</p> <p>If someone a person lives with has symptoms of COVID-19, or has tested positive for COVID-19, they will not need to self-isolate if any of the following apply:</p> <ul style="list-style-type: none"> <li>•they're fully vaccinated – this means 14 days have passed since your final dose of a COVID-19 vaccine given by the NHS</li> <li>•<del>they're under 18 years, 6 months old</del></li> <li>•they're taking part or have taken part in a COVID-19 vaccine trial</li> <li>•they're not able to get vaccinated for medical reasons</li> </ul> <p>Following advice from the Director of Public Health Northampton, “On receipt of a positive PCR test in the home, any school age siblings/sons/daughters of the case also seek an urgent PCR test and remain at home until the result is known-and if negative, take a daily LFT for 10 days thereafter to ensure no transmission into other school years/other school settings occurs. If no PCR test is taken, then the siblings/sons/daughters should remain off school until the positive case can come out of isolation.”</p>

		<p>However, even if they do not have symptoms, they should still:</p> <ul style="list-style-type: none"> <li>•get a PCR test on GOV.UK to check if they have COVID-19</li> <li>•follow advice on how to avoid catching and spreading COVID-19</li> <li>•consider limiting contact with people who are at higher risk from COVID-19</li> </ul> <p>If someone develops symptoms during the school day, a phone call home will be made and they will be asked to be collected ASAP. If an affected person is awaiting collection, they should be moved, if possible, to a room (Reception foyer) where they can be isolated behind a closed door. Staff should wear PPE. If they are a child, depending on the age of the child appropriate adult supervision may be required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area, which is at least 2 metres away from other people.</p> <p>If they need to go to the bathroom while waiting to be collected, they should use the designated bathroom for the Reception foyer. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.</p> <p>School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is required to self-isolate or quarantine because of COVID-19 in accordance with relevant legislation or guidance published by PHE or the DHSC they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be recorded as code I (illness).</p> <p><b>If a member of the school community tests positive, the school community will be informed (without breaching GDPR guidelines), so that they can make informed decisions as to whether they want to undertake more regular LFD tests or take precautionary measures.</b></p> <p>For most settings it will make sense to think about taking extra action if the number of positive cases substantially increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, whichever of these thresholds is reached first:</p> <ul style="list-style-type: none"> <li>• 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or</li> <li>• 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period</li> </ul> <p>At the point of reaching a threshold, education and childcare settings should review and reinforce the testing, hygiene and ventilation measures they already have in place. Settings should also consider:</p> <ul style="list-style-type: none"> <li>• whether any activities could take place outdoors, including exercise, assemblies, or classes</li> <li>• ways to improve ventilation indoors, where this would not significantly impact thermal comfort</li> <li>• one-off enhanced cleaning focussing on touch points and any shared equipment</li> </ul> <p>Settings may wish to seek additional public health advice if they are concerned about transmission in the setting, either by phoning the DfE helpline (0800 046 8687, option 1) or in line with other local arrangements.</p>
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			<p>A director of public health or an HPT may give settings advice reflecting the local situation. In areas where rates are high, this may include advice that local circumstances mean that the thresholds for extra action can be higher than set out above.</p> <p>NB All settings should seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19. They can do this by phoning the DfE helpline (0800 046 8687, option 1), or in line with other local arrangements. Hospitalisation could indicate increased severity of illness or a new variant of concern. Settings may be offered public health support in managing risk assessments and communicating with staff and parents.</p>
Transmission of Covid-19 via arrival at school	Increased transmission of virus on arrival at the school premises	Employee, visitors, agency staff, member of the public Pupils.	<p>Primary schools distribute LFT kits to their staff. In all cases the participation in testing is an individual decision.</p> <p>Hand washing on arrival to be encouraged and sanitizer provided. Hand washing / antibacterial gel on arrival by pupils and at other key points in the day to be supervised by staff. Sanitiser will be available at Reception Desk and forms part of the signing in protocol.</p> <p>Processes and procedures are established and shared with Parents for pick up and drop off arrangements. Families will be split in two and will be allocated different times to drop off and collect. In the morning, children wait at the school gate and are called in individually and directed to an adult with hand sanitiser. At the end of the day, Classes 1 will exit their class from the outdoor covered area, Class 2 will exit from the end of the corridor, Classes 3 and 4 through the hall patio doors.</p>
Transmission of Covid-19 via arrival at school	People in close contact therefore increasing the transmission and spread of Covid-19	Employee, visitors, agency staff, member of the public, Pupils	<p><b>Staff are able to wear face masks where they cannot maintain social distancing if they so wish.</b></p> <p>Records to be kept of pupils and staff within classes and any close contact that takes place between children and staff in different classes. Registers for class to be kept which details adults within the groups. These need to be uploaded by the school office at the end of the day so that the Head has access to lists in case of NHS Test and Tracing contacting to ask for information.</p> <p>Toilets have been designated to specific classes. The staff toilet has to be cleaned after each use.</p> <p><b>Initially, whole school gatherings will continue to be remote via zoom.</b></p> <p><b>Whole school staff meetings and CPD will ideally take place in the school hall where staff can spread out, if not they will take place via zoom.</b></p> <p>If there is a substantial increase in the number of positive cases in the school, a director of public health might advise that face coverings should temporarily be worn in communal areas or classrooms (by pupils staff and visitors, unless exempt).</p> <p>NB In some local areas it may become necessary to reintroduce ‘bubbles’ for a temporary period, to reduce mixing between groups. Any decision to recommend the reintroduction of ‘bubbles’ would not be taken lightly and would need to take account of the detrimental impact they can have on the delivery of education. If this were to happen, we would revert to the risk assessment which was in place dated 14<sup>th</sup> May 2021.</p> <p>For most settings it will make sense to think about taking extra action if the number of positive cases substantially increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, whichever of these thresholds is reached first:</p>

			<ul style="list-style-type: none"> <li>• 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or</li> <li>• 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period</li> </ul> <p>At the point of reaching a threshold, education and childcare settings should review and reinforce the testing, hygiene and ventilation measures they already have in place. Settings should also consider:</p> <ul style="list-style-type: none"> <li>• whether any activities could take place outdoors, including exercise, assemblies, or classes</li> <li>• ways to improve ventilation indoors, where this would not significantly impact thermal comfort</li> <li>• one-off enhanced cleaning focussing on touch points and any shared equipment</li> </ul> <p>Settings may wish to seek additional public health advice if they are concerned about transmission in the setting, either by phoning the DfE helpline (0800 046 8687, option 1) or in line with other local arrangements.</p> <p>A director of public health or an HPT may give settings advice reflecting the local situation. In areas where rates are high, this may include advice that local circumstances mean that the thresholds for extra action can be higher than set out above.</p> <p>NB All settings should seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19. They can do this by phoning the DfE helpline (0800 046 8687, option 1), or in line with other local arrangements. Hospitalisation could indicate increased severity of illness or a new variant of concern. Settings may be offered public health support in managing risk assessments and communicating with staff and parents.</p> <p><b>Ventilation</b></p> <p>All systems to remain energised in normal operating mode.</p> <p>Where mechanical ventilation is present, re-circulatory systems should be adjusted to full fresh air. If this is not possible, systems should be operated as normal.</p> <p>Where possible, occupied room windows should be open. Under the Health Welfare and Safety Regulations room temperatures have to be comfortable. The accompanying Approved Code of Practice defines this as a minimum room temperature of 16°C for non-manual occupations. (Advice on managing ventilation can be found in the latest operational guidance for schools).</p> <p>Ventilation to chemical stores should remain operational.</p> <p>Windows will need to be opened in shared rooms. Request parents (and staff) layer up to ensure that they are not cold.</p>
Consultation with staff	Staff made aware of implications for them	Staff	<p>Staff meetings held prior to reopening (in person or virtually) to share expectations with all staff and to address concerns</p> <p>Regular meetings timetabled to allow staff opportunities to express concerns.</p>

			Access to well-being and mental Health support communicated and shared with staff.
Staffing	Insufficient key staff available to allow school to reopen	Staff and Pupils	<p>Staffing numbers required for entire eligible cohort have been determined including support staff such as facilities, IT, midday and office/admin staff.</p> <p>Including at least one of the following:</p> <ul style="list-style-type: none"> <li>• Paediatric First aider (where children in Reception age group)</li> <li>• Designated Safeguarding Lead (DSL) – contactable, do not have to be onsite</li> </ul>
Outside Providers on Site	Staff working in multiple schools (e.g. Pacesetters Sports, Educational Psychologists)	Employee, visitors, agency staff, member of the public, Pupils	<p>School risk assessment to be shared with regular outside providers before they come on site so external providers are aware of the procedures in place</p> <p>Any visitors on site who have not received risk assessment to have procedures explained to them.</p>
Poor hand & respiratory hygiene	Poor hand & respiratory hygiene leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public, Pupils	<p>Follow Hand Washing protocol. You must ensure that pupils clean their hands regularly using either soap and water or hand sanitiser), including:</p> <ul style="list-style-type: none"> <li>• When they arrive at school</li> <li>• When they return from breaks</li> <li>• Before and after eating</li> <li>• Before they go home</li> </ul> <p>Soap and water, and regular hand washing for at least 20 seconds, is the best way of staying safe. Hand washing with soap employs mechanical action that loosens bacteria and viruses from the skin, rinsing them into the drain. Drying hands afterwards makes the skin less hospitable to the virus. Hand sanitiser can be effective if soap is not available, or the situation makes using soap less feasible (for example, when outside), but using hand sanitiser provides none of the virus-destroying friction that rubbing your hands together and rinsing with water provides.</p> <p>Staff, visitors and pupils should be reminded to wash their hands for 20 seconds more frequently than normal, including on arrival at the setting, before and after eating, before they go home and after sneezing or coughing.</p> <p>Staff should supervise young children to ensure they wash their hands for 20 seconds with soap and water (or hand sanitiser if soap is not available or feasible in the particular situation)</p> <p>Coughs and sneezes to be caught in tissues.</p>

			Some children and young people with special educational needs and disabilities may require additional support in following public health advice, or may find frequent hand washing distressing. Staff should know where this is likely to be the case, and how they can best support individual children and young people.
Surfaces contaminated with Covid-19	Increased transmission of covid-19 via surface – face contact	Employee, visitors, agency staff, member of the public	<p>Regular points of contact such as door handles, push plates, code pads and WC levers should be cleaned regularly unless it is already known (with certainty) that the building has not been in use for 48hrs. It should be assumed this is not the case unless there is knowledge to the contrary. Each class will have their own allotted set of classroom cleaning equipment that will be stored appropriately within the classrooms.</p> <p>Cleaning checklists are in all rooms and should be completed indicating dates / times of cleaning / signature of cleaner.</p> <p>Follow government guidelines as follows:</p> <p><a href="https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings">https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings</a></p> <p>Checklist of cleaning has been created and is used to ensure that all frequently used objects and items are cleaned to include:</p> <ul style="list-style-type: none"> <li>• Door handles</li> <li>• Desks, table tops</li> <li>• Bannisters</li> <li>• Light switches</li> <li>• Toilets</li> <li>• Sinks</li> </ul> <p>Additional cleaning capacity in place through use of teaching and support staff.</p> <p>The staff toilet should be cleaned after each use. The children’s toilets will be cleaned after breaks and lunchtime and at the end of the school day by the cleaning company. If an adult leaves the classroom during the day (e.g for PPA) then they should clean the area they have been. If an adult is working in area with different children from different bubbles (e.g. PLW), the area should be cleaned between children. Regular points of contact such as door handles, push plates, code pads and bannisters should be cleaned before school and after lunchtime.</p>
Intimate care and minimising the risk of Covid-19	Intimate care procedures leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public, Pupils	<p>Some children, and young people with special educational needs, may require personal care support. In these circumstances, staff need to increase their level of self-protection, such as minimising close contact (where appropriate), cleaning frequently touched surfaces, and carrying out more frequent handwashing. School staff should continue to use the PPE that they have always used (such as an apron and gloves in addition to masks) when undertaking more intimate care with pupils.</p> <p>In circumstances where staff feel PPE is appropriate following the principles above careful judgement should be used to consider likely risk and also any impact of behaviour the child/young person may demonstrate as a result of PPE being worn. Separate guidance is available on the use of PPE in education and child care is available at; <a href="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/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</a></p>

Managing risk of an individual displays symptoms	Proximity to a person displaying covid-19 symptoms leading to increased transmission of covid-19	Employee, pupils, agency staff, member of the public	<p>If someone becomes unwell and starts to display the main symptoms of Covid-19, a new continuous cough, a high temperature or a loss of taste or smell in an education setting they must be sent home, advised to arrange a test and self isolate.</p> <p>Identified room has been located enabling the contagion be contained, if required: Reception foyer. A chair within this room will be able to be wiped clean for the contagious person to use. If an affected person is awaiting collection, they should be moved, if possible, to a room (Reception foyer) where they can be isolated behind a closed door. Staff should wear PPE. If they are a child, depending on the age of the child appropriate adult supervision may be required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area, which is at least 2 metres away from other people.</p> <p>If they need to go to the bathroom while waiting to be collected, they should use the designated bathroom for the Reception foyer. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.</p> <p>Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):</p> <ul style="list-style-type: none"> <li>• Should be put in a plastic rubbish bag and tied.</li> <li>• The plastic bag should then be placed in a second bin bag and tied.</li> <li>• It should be put in a suitable and secure box (in outside area between Classes 1 and 2) and marked with the date it is place there.</li> <li>• If the individual tests negative, this can be put in with the normal waste.</li> </ul> <p>If the individual tests positive, then store it for at least 72 hours and put in with the normal waste.</p>
Catering	Arrangement for FSM pupils who may have to isolate	Pupils	Arrangements for the continued provision of FSMs for children not attending school owing to isolation and remote learning requirements are in place with Kingswood Catering through food boxes.
Pupil Re-orientation	Pupil and parents not aware of the new requirements and routines	Pupils and staff	<p>Approach and expectations determined and communicated with staff and parents before 1<sup>st</sup> September.</p> <p>Arrangements for the education of pupils who are isolating are clear for parents e.g. SeeSaw as it is now a legal requirement for schools to have in place procedures for remote learning.</p> <p>Staff, parents and pupils informed of the need to self-isolate for 10 days when returning from a range of overseas locations.</p>



Covid 19	Increased vulnerability to illness	<p>BAME Children and staff</p> <p>New and expectant mothers</p>	<p>Identify all children and staff in school who may be considered as part of this community.</p> <ul style="list-style-type: none"> <li>• Discuss concerns with parents or staff</li> <li>• Ensure all those identified have the opportunity to share concerns</li> <li>• Ensure adequate PPE is always available for staff use,</li> <li>• Ensure that information shared and updated by the DfE and <a href="https://bameednetwork.com">https://bameednetwork.com</a> is reflected in revisions of this risk assessment.</li> <li>• Conduct specific risk assessments for Clinically vulnerable staff and young and expectant mothers</li> </ul>
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**Appendix 1: Clean hands protect against infection (WHO protocol)** Protect yourself

- Clean your hands regularly.
- Wash your hands with soap and water, and dry them thoroughly.
- Use alcohol-based handrub if you don't have immediate access to soap and water.

How do I wash my hands properly? Washing your hands properly takes about as long as singing "Happy Birthday" twice, using the images below:



## **Appendix 2**

People with the following conditions are automatically deemed clinically extremely vulnerable and therefore have been previously included on the Shielded Patient List:

- solid organ transplant recipients
- people with specific cancers:
- people with cancer who are undergoing active chemotherapy
- people with lung cancer who are undergoing radical radiotherapy
- people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- people having immunotherapy or other continuing antibody treatments for cancer
- people having other targeted cancer treatments that can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
- people who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs
- people with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD)
- people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell disease)
- people on immunosuppression therapies sufficient to significantly increase risk of infection
- problems with your spleen, for example splenectomy (having your spleen removed)
- adults with Down's syndrome
- adults on dialysis or with chronic kidney disease (stage 5)
- women who are pregnant with significant heart disease, congenital or acquired
- other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs – GPs and hospital clinicians have been provided with guidance to support these decisions