

Introduction

This risk assessment has been prepared to assist school's duty holders in their effective management of the risk to people from Coronavirus (COVID-19), drawing on guidance published by [The Department for Education](#) and [Public Health England](#) .

Context

Coronavirus COVID-19 may be present in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing. Transmission occurs directly between people when virus expelled by an infected person comes into contact with the mouth and/or nose and/or eyes of another person. Transmission also occurs indirectly when the virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature). Most people infected with the virus experience disease with mild or moderate symptoms, however a significant minority become severely unwell requiring hospitalisation and for some people the disease may present long lasting, life changing consequences, or is fatal.

Basic Principles.

The control measures follow the basic principles outlined in the current advice provided by government around safe social distancing, hand and respiratory hygiene, self- awareness of risk groups (clinically extremely vulnerable, clinically vulnerable, general population) and of symptoms of high temperature and / or new continuous cough and/or loss of, or change in, normal sense of taste or smell as a symptom.

If you have these symptoms, no matter how mild, book a test at www.gov.uk/get-coronavirus-test or order or book a test by calling 119, as soon as possible.

The Risk Assessment.

This document is intended to be a living document, It will therefore be subject to regular review and revision as change occurs and assessed needs direct in order to ensure its continued adequacy, in so far as it is reasonably practicable to do so. If events change on the day, dynamic assessment based upon professional judgement will inform any additional control measures.

Remember - Hands. Face. Space. Ventilation.

Hands Wash your hands well and often.

Face Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas.


People are expected to and recommended to wear a face covering in crowded or enclosed spaces, where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school.

Space Reduce the number of people you come into contact with.

Ventilation Ensure workplaces are adequately ventilated preferably with a wholesome supply of fresh air, or by mechanical ventilation or a combination of both.

Consultation.

Relevant duty holders should consult with their workforce and trade union representatives as part of putting measures in place. Involving them promotes ownership and demonstrates that you take their health and safety seriously.

Risk Assessment	COVID-19 re-opening arrangements	
School	The Links Primary School	
Department:		
Section:		

Task/Activity:	Implementing Protective Measures to Mitigate against Covid-19 Infection
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Author:	Louise Daly	Date:	31.08.21 Updated 11.11.21
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Quality Assurance Check by Manager / Line Manager	Paul Bridge	Date:	
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Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
Admitting children into school	In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others.	<p>If a parent or carer insists on a pupil attending your school;</p> <ul style="list-style-type: none"> the school will take the decision to refuse the pupil if our reasonable judgement is that it is necessary to protect other pupils and staff from possible infection with COVID-19. <p>The school's decision would need to be carefully considered in light of all the circumstances and current public health advice.</p>			
Dept of Education Contingency Framework.	The contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings and sets out that local authorities, Directors of Public Health and PHE health protection teams are responsible for managing localised outbreaks and that they play an important role in providing support and advice to education and	<p>The Contingency framework, may be supported by further control measures which may include amongst others:</p> <ul style="list-style-type: none"> changing ways of working improved ventilation enhanced targeted cleaning strengthening communications temporary reinstatement of face coverings 			

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	<p>childcare settings. Public Health England may produce an outbreak plan template and that would then supersede this document.</p>	<ul style="list-style-type: none"> • reinstatement of lateral flow devices testing on site • increased frequency of testing. <p>Please see a copy of the schools Contingency Plan for detailed information on control measures.</p>			
Schools clinically extremely vulnerable workforce	Clinically extremely vulnerable people should currently attend school or their place of work unless specifically advised against this by their clinician or GP.	<p>Further details of CEV people available at Appendix 1.</p> <p>HR support will be provided for any staff needing support.</p>			
Clinically extremely vulnerable children.	<p>The government announced on the 26th August that Children and young people will no longer be classed as clinically extremely vulnerable.</p> <p>An update from the Department for Education confirmed that Clinical studies have shown that children and young people, including those originally considered to be clinically extremely vulnerable (CEV), are at very low risk of serious illness if they catch the virus</p> <p>The UK Clinical Review Panel has recommended that all children and young people under the age of 18 should no longer be considered CEV and should be removed from the Shielded Patient List, the national database of people considered clinically extremely vulnerable.</p>	<p>All children and young people should continue to follow the same guidance as everyone else, which can be found at www.gov.uk/coronavirus.</p> <p>For a very few individual children specific clinical advice may be given and this should continue to be followed.</p>			
Additional local measures	The school shall work with the local health protection teams in the case of a local outbreak	If there is a substantial increase in the number of positive cases or if central government offers the area an enhanced response package, the school shall follow any instruction provided by Director of Public Health including any temporary reintroduction of some control measures.			

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Thresholds for extra action	<p>The Operational Guidance sets out the measures that all education settings should have in place to manage transmission of COVID-19 day to day. 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.</p> <p>For most education and childcare settings, whichever of these thresholds is reached first:</p> <ul style="list-style-type: none"> • 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or • 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period. 	<p>The DfE helpline, a Director of Public Health or a Health Protection Team may determine that further additional action should be taken.</p> <p>This may include:</p> <ul style="list-style-type: none"> • Strengthened Communication • Temporarily Reinstating face Coverings • Reinstating On-site LFD Testing • Increased Frequency of Testing. <p>Extra actions. When the thresholds are reached, education and childcare settings should review and reinforce the testing, hygiene and ventilation measures they already have in place.</p> <p>Settings should also consider:</p> <ul style="list-style-type: none"> • whether any activities could take place outdoors, including exercise, assemblies, or classes • ways to improve ventilation indoors, where this would not significantly impact thermal comfort • one-off enhanced cleaning focussing on touch points and any shared equipment. <p>From the autumn term, the Stockton-on-Tees Public Health team will continue to be available for advice, guidance and management of outbreaks. Please continue to report cases into the local team at www.digital.stockton.gov.uk/covid19-contactus</p>			

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Pregnant employees	<p>There is a long-standing requirement for Employers to put in place measures to support pregnant employees in the workplace and carry out an Expectant Mothers Risk Assessment.</p> <p>Pregnant women of any gestation should only continue working if the Expectant Mothers risk assessment and Individual Risk Assessment advises that it is safe to do so.</p> <p>28 weeks pregnancy and beyond, or pregnant with underlying health conditions: The Council and our maintained Schools support all pregnant employees of 28 weeks pregnancy and beyond or who are pregnant with underlying health conditions that place them at greater risk of severe illness from COVID-19 at any gestation, to work from home, be offered alternative work to limit contact with others or where either is not possible refrain from work.</p> <p>This is because although they are at no more risk of contracting the virus than any other non-pregnant person who is in similar health, they have an increased risk of becoming severely ill and of pre-term birth if they contract COVID-19.</p>	<p>In addition to the standard Expectant Mothers Risk Assessment, a COVID-19 Individual Risk Assessment should be carried out.</p> <p>Some pregnant workers may be at greater risk of severe illness from COVID-19 and this should be taken into account in the Individual Risk Assessment with the identification of control measures specifically to protect against COVID-19 infection.</p> <p>If control measures can not be put in place and alternative working options are not available, the person should refrain from work. This is in line with normal requirements of the Management of Health and Safety at Work Regulations 1999.</p> <p>Government guidance for pregnant workers.</p> <p>The Royal College of Obstetrics and Gynaecology (RCOG) has also published information on Coronavirus infection and pregnancy.</p>			
Pupil wellbeing	Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety,	Useful links and sources of support on promoting and supporting mental health and wellbeing in schools is available here .			

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	<p>stress or low mood.</p> <p>.</p>	<ul style="list-style-type: none"> Meetings with parents will be held Outside agencies will be consulted to provide support (Emotional Health Team/Early Help) 			
Wearing face coverings	<p>Face coverings are no longer advised for pupils, staff and visitors, either in classrooms or communal areas.</p> <p>No pupil or student should be denied education on the grounds of whether they are, or are not, wearing a face covering.</p> <p>We shall make reasonable adjustments in consultation with parents and children to support disabled pupils to ensure they can access education successfully.</p>	<p>People are expected to and recommended that face coverings are worn in enclosed and crowded spaces where they may come into contact with people they don't normally meet.</p> <p>Staff have the option to wear face coverings in corridors and communal areas where social distancing is not possible.</p> <p>In the event of an outbreak, the Director of Public Health may advise that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt).</p> <p>From 15.11.21 following advice sent from Director of Public Health England 10.11.21 staff will be expected to wear facemasks in communal areas or school or when walking around school.</p> <p>The school's outbreak management plans should cover this possibility.</p>			
Mixing and bubbles.	<p>From the start of the autumn term, it will no longer be necessary to keep children in consistent groups, or bubbles.</p>	<p>The school's outbreak management plan will make provision for the reintroduction of temporary bubbles to reduce mixing between groups, in the event of an outbreak.</p> <p>From 15.11.21 following advice sent from Director of Public Health England 10.11.21 school will put in the following measures:</p> <ul style="list-style-type: none"> no large gatherings where multiple year groups mix 			

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		<ul style="list-style-type: none"> • assemblies to remain online • dinner hall to be zoned so children only sit with their class (no mixing indoors between classes) • Extra-curricular activities to ensure children from different classes work separately (this will remain under review) 			
Hand hygiene	Frequent and thorough hand cleaning continues to be important in the prevention of infection. Pupils, staff and visitors should ensure they clean their hands regularly with soap and water or hand sanitiser.	<p>COVID 19 safety instruction signs are fitted throughout the schools.</p> <p>Staff & students are reminded to regularly wash hands with soap and water or hand sanitiser.</p> <p>Hand washing facilities / hand sanitisers are available to every class and in various locations around our sites e.g. main entrances, classrooms & dining-rooms.</p> <p>Students, staff & visitors are instructed to wash their hands on entering the school. This is repeated whenever staff / students move around the site. e.g. breaks, where class locations need to change.</p> <p>A supply of tissues is maintained for use in classrooms.</p> <p>A cleaning kit containing a disinfectant spray, disposable gloves and disposable tissues or equivalent, is maintained in classrooms in case a pupil coughs or sneezes.</p>			
Respiratory hygiene	'Catch it, bin it, kill it' continues to be important. Catch it, bin it, kill it posters.	The e-Bug COVID-19 website contains free resources for you, including materials to encourage good hand and respiratory hygiene.			
Personal Protective Equipment [PPE]	Most staff in schools will NOT require PPE beyond what they would usually require for their work.	If a child, young person, or student already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be			

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		<p>used. Additional PPE for COVID-19 is only required in a very limited number of scenarios:</p> <ul style="list-style-type: none"> • <u>if an individual child, young person or student becomes ill with COVID-19 symptoms and only then if close contact is necessary</u> 			
Cleaning regimes	School should maintain their elevated cleansing of regularly contacted surfaces.	<p>School cleaning regimes will be reviewed and increased in proportion to the identified risk.</p> <p>As a minimum, areas are thoroughly cleaned at least once daily.</p> <p>High risk areas such as toilets, circulation & social areas will be cleaned regularly throughout the day.</p> <p>Where necessary additional cleaning time / staff are being employed to provide increased services.</p> <p>Where a possible or suspected COVID 19 contamination has been identified, the area will be locked and not re-used until the room has been decontaminated.</p> <p>“Fogging Machines” are available across the Trust Sites and will be used in line with their specific Risk Assessment.</p>			
Effective ventilation.	School staff should consider and include effective ventilation alongside other control measures to reduce risk of transmission within classrooms and other work spaces.	<p>To improve ventilation, classroom / office doors can be propped open when rooms are in use.</p> <p>Doors must be closed whenever a room is vacated – in line with fire risk assessments.</p>			

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		<p>Windows should be opened to create a through draft of fresh air whilst still maintaining a healthy adequately heated environment, especially in the winter.</p> <p>Windows should be fully opened at break / lunch times or when a room is not used, to purge the air between classes.</p>			
Symptomatic cases or positive tests.	<p>Pupils, staff and other adults should self isolate straight away and get a PCR test as soon as possible if they have any of these 3 symptoms of COVID-19, even if they are mild:</p> <ul style="list-style-type: none"> • a high temperature • a new continuous cough • or a loss or change to the sense of taste or smell, <p>or have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine).</p> <p>Pupils, staff and other adults should follow public health advice on when to isolate and what to do.</p>	<p>People with symptoms should avoid using public transport and, wherever possible, be collected by a member of their family or household.</p> <p>If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible.</p> <p>Appropriate PPE should also be used if close contact is necessary, further information on this can be found in the use of PPE in education, childcare and children’s social care settings guidance.</p> <p>Any rooms they use should be cleaned after they have left.</p>			
Individuals NOT required to isolate	<p>From 16 August, people will not be required to self-isolate if they live in the same household as someone with COVID-19 and any of the following apply:</p> <ul style="list-style-type: none"> • You are fully vaccinated • you are below the age of 18 years 6 months • you have taken part in or are currently part of an approved 	<p>They will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so.</p> <p>However, people should not arrange to have a PCR test if they have previously received a positive PCR test result in the last 90 days, unless</p>			

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	<p>COVID-19 vaccine trial</p> <ul style="list-style-type: none"> • you are not able to get vaccinated for medical reasons. <p>Fully vaccinated means that you have been vaccinated with an MHRA approved COVID-19 vaccine in the UK, and at least 14 days have passed since you received the recommended doses of that vaccine.</p>	<p>you develop any new symptoms of COVID-19, as it is possible for PCR tests to remain positive for some time after COVID-19 infection.</p> <p>Staff who do not need to isolate, and children and young people aged under 18 years & 6 months who usually attend school, and have been identified as a close contact, should continue to attend school as normal.</p> <p>They do not need to wear a face covering within the school, but it is expected and recommended that these are worn when travelling on public or dedicated transport.</p>			
<p>Lateral flow device testing – ongoing for staff and pupils.</p>	<p>All staff in primary schools and secondary schools should test themselves using lateral flow device tests twice per week at home, until the end of September, when this will be reviewed.</p> <p>All early years and wraparound childcare staff should also continue to test twice weekly as they have done throughout the summer.</p>	<p>Those who test positive should isolate, take a confirmatory polymerase chain reaction (PCR) test, and continue to isolate if the result is positive.</p>			
<p>Confirmatory PCR tests</p>	<p>Staff with a positive LFD test result should self-isolate in line with the stay at home guidance.</p> <p>They will also need to get a free PCR test to check if they have COVID-19.</p> <p>Whilst awaiting the PCR result, the individual should continue to self-isolate.</p> <p>.</p>	<p>If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.</p> <p>Additional information on PCR test kits for schools and further education providers is available.</p>			

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First aid and first responders	<p>Due to the nature of first responders providing immediate assistance to individuals who may have coronavirus infection, use of personal protective equipment and infection prevention and control measures should continue to be practised by first responders.</p> <p>Guidance for first aiders and first responders</p> <p>The school's first aid assessment should be reviewed to ensure an adequate provision, including at least one paediatric First Aider present at all times in Primary schools.</p> <p>Advice from the St John Ambulance is available here.</p>	<p>Effective hand hygiene.</p> <p>Personal protective equipment.</p> <ul style="list-style-type: none"> • Disposable gloves and plastic apron • Fluid resistant surgical face mask • If splashes or droplets of blood or body fluids likely – use disposable eye protection, face visor or goggles. <p>Keep others at least 2mts away.</p> <p>Avoid mouth-to-mouth during CPR – apply compressions only, unless in the case of a child patient – use a resuscitation face shield.</p>	All first aiders		
Educational visits	<p>From the 1st September, all types of residential visits within the UK for all schools and settings is allowed. The school shall undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as, minimising contact with others, maintaining:</p> <ul style="list-style-type: none"> • social distancing • good hand hygiene • good ventilation, <p>is included as part of that risk assessment.</p>	<p>School's residential trip risk assessments must include a planned and prepared contingency arrangement to respond to supervisory staff or students becoming symptomatic or testing positive with a lateral flow device during the trip. Travel time to return to home should be minimised.</p> <p>Any attendance restrictions should be reflected in the visits risk assessment and setting leaders should consider carefully if the educational visit is still appropriate and safe.</p> <p>Only students who are attending the setting should go on an educational visit.</p>	All staff and educational visits co-ordinators.		

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	<p>Establishments planning a residential visit to a different country in the UK (Wales, Scotland or Northern Ireland) should check current government guidance for that country.</p> <p>In particular, they should check the guidance for accommodation providers, as this may limit the type and size of groups that they can accommodate.</p>	<p>Education settings should consult the health and safety guidance on educational visits when considering visits.</p> <p>From 15.11.21 following advice sent from Director of Public Health England 10.11.21 school will put in the following measures:</p> <ul style="list-style-type: none"> • visits will only be allowed where risk assessment shows that children can be kept separate from children in other schools and their will be no mixing. • Facemasks to be worn by staff • Hand sanitiser taken by school to ensure good hygiene whilst on visits. <p>Any visits that cannot provide these measures will not be allowed to proceed.</p> <p>General guidance about educational visits is available and is supported by specialist advice from the Outdoor Education Advisory Panel .</p>			
Equality	<p>All staff, as duty holders, shall have regard for the particular needs of different groups of workers or individuals.</p> <p>For example, those with underlying health conditions, pregnant staff and those with protected characteristics.</p>	<p>Managers must consider and put into place any particular measures or reasonable adjustments to take account of the employer's obligations under the Equality Act.</p> <p>Whilst face covering are no longer legally required, all staff must remain sensitive to and accommodate employee's personal choice and personal responsibility to wear a face covering indoors.</p>	All staff where necessary		
School visitors or contractors	Visiting contractors should be made of the school's control measures and ways of working.	<p>Visitors / contractors will only be allowed into school by pre-arranged appointment.</p> <p>Where working on site is necessary, numbers of visitors / contractors should be limited to only those required.</p>			

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		<p>Visitors / contractors will remain in or just outside reception until they can be escorted to their area or work.</p> <p>As part of the Contractor Risk Review process, updated COVID19 Risk Assessments should be requested from individual contractors and reviewed prior to work commencing.</p> <p>As part of the signing-in process visitors / contractors' attention will be drawn to the posters highlighting the steps taken by the Trust to limit the spread of the virus.</p> <p>From 15.11.21 following advice sent from Director of Public Health England 10.11.21 school will put in the following measures:</p> <ul style="list-style-type: none"> • only essential visitors to come in to school by prior arrangement. Essential are viewed as those who work directly with children for educational or health support. • Visitors to school will be asked to wear face masks when in communal areas and when walking around school. <p>Anyone displaying symptoms of the virus should not come to site.</p> <p>Wash your hands as you enter the site, using the sanitisers provided.</p> <p>Face masks are no longer mandatory, but may be worn in corridor and communal areas if an individual chooses or this is stipulated within their own business risk assessments.</p>			

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		<p>Social distancing to be practiced where possible.</p> <p>Respiratory hygiene - "Catch it. Bin it. Kill it", to be practiced.</p> <p>Where possible work should be undertaken outside of peak times (This can vary between sites but broadly peak times are Term time, Monday to Friday 8.45am – 3.30pm.)</p> <p>Where this cannot be avoided steps must be taken to minimise the areas accessed and the number of personal contacts which will take place.</p> <p>Suitable welfare facilities will be identified on site. Toilets are regularly cleaned throughout the day.</p> <p>Any breaks to be taken at quiet time to avoid busy areas.</p> <p>Individuals to provide their own food and drink to avoid contamination.</p>			

	Name	Date	Comments
Reviewed	<p>Louise Daly</p> <p>Louise Daly</p> <p>Julia Hutchinson</p> <p>Andrea Mitchell</p>	<p>08.07.20</p> <p>21.09.20</p>	<p>Changes made to reflect guidance released on 02.07.20</p> <p>https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools</p> <p>Reviewed systems in school. Changes annotated in bold. Changes made regarding new information from NE PHE.</p>

	Louise Daly Julia Hutchinson	5 th October	Review of procedures – no changes made.
	Louise Daly Julia Hutchinson	9 th November	Changes made to reflect guidance released following Lockdown 5 th November https://www.gov.uk/guidance/education-and-childcare-settings-new-national-restrictions-from-5-november-2020
	Louise Daly	11 th November	Following a visit by Paul Bridge to check facilities and in response to Nursery and Reception Bubbles closing, the risk assessments has been reviewed to include further distancing and preventative measures within Early Years to ensure that the Nursery and Reception bubbles have limited contact.
	Louise Daly	14 th December	Changes made to number of days isolating following change in Governments Guidance PHE Guidance received 14.12.20
	Louise Daly	5 th January	Following National Lockdown announcement 04.01.21 and move the Keyworker/Vulnerable and online learning.
	Louise Daly	25 th January	Inclusion of staff Asymptomatic testing Separate Risk Assessment also available
	Louise Daly	1 st March	Updated to reflect Schools coronavirus (COVID-19) operational guidance February 2021 – in preparation for wider opening March 8 th
		31 st August 21	Updated to reflect The Schools Operational Guidance 18.8.21 Schools Contingency Framework – August 2021 Children no longer considered clinically extremely vulnerable and removed from the Shielded Patients List 26.8.21.
	Louise Daly	11 th November 2021	Following letter from Public Health 10.11.21 and Trust meeting 11.11.21 additional measures have been recommended due to transmission rate.

Appendix 1. People more at risk from Coronavirus.

Clinically extremely vulnerable

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

