

# COVID-19 Step 4 Model Risk Assessment for Schools and Educational Settings

(Recommended for implementation from the end of Summer term 2021)

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### Introduction

The following workplace risk assessment is intended to support all London Borough of Hounslow schools and educational settings in the management of risk whilst planning for and during full reoccupation of schools in the autumn term. These resources have been created by the council's Health & Safety Team, in collaboration with colleagues in Children's Services, and in line with the latest advice, at the time of review, from the government, NHS, Public Health England and the DfE.

## 1 –Completing the COVID-19 Risk Assessment

When completing the risk assessment, please follow the steps outlined below:

#### Step 1: Identify the Hazards

The risk assessment template has been pre-populated with hazards that will hopefully cover most of the relevant topics.

However, you should ensure that the risk assessment is tailored to your situation and carefully consider if further hazards need to be added. School may, for instance wish to include other organisational risks that are not directly health and safety related, for completeness.

When attempting to identify hazards, it should be broken down into the workplace environment, onsite and off–site work activities. It may be necessary to carry out a review of the workplace and/or observe the task in order to identify where and how hazards arise in practice and how harm can occur. Staff representatives will also help identify problem areas.

When identifying hazards, the following should be considered:

- Routine and non-routine activities of all persons having access to the workplace (including staff, contractors, visitors, pupils etc.)
- Human behaviour, capabilities, and other human factors
- Identified hazards originating outside of the workplace, which may adversely affect the health and safety of staff and /or service users
- Infrastructure, equipment, and materials at the workplace, whether provided by the employer or others
- Changes or modifications, including temporary changes, to activities, equipment, or materials.
   These should be assessed prior to their introduction
- Any applicable existing, new, or updated legal obligations
- The design of work areas, processes, installations and operating procedures, including their adaptation to human capabilities

#### Step 2: Decide who is at Risk

For each hazard, you will need to be clear about who might be harmed as it will help to identify the best way of managing the risk. This doesn't mean listing everyone by name, but rather identifying groups of people and any people who may be particularly at risk, e.g. young persons, new and expectant mothers.

#### **Step 3: Implement preventative Measures**

The risk assessment template has been prepopulated with broad preventative measures, as recommended by government guidance and the council's health and safety advisory service.

You will need to consider these preventative measures carefully and amend them so that they are specific to your setting and provide the additional detail necessary to outline exactly what you will be doing to achieve the recommended outcomes. Comments have been provided on the form to help direct school where they need to add additional content.

You should amend the form by removing information that is not relevant to your setting and adding information where you feel there are gaps. If you cannot adhere to the recommended preventative measures, you should develop alternative solutions. If you cannot adhere to the recommended preventative measures and you are unable to find alternatives, this will impact the level of risk to which your staff and children are exposed.

When considering what control measures are required consider controls in the following order.

a)	Elimination	Get rid of the hazard altogether
b)	Substitution	Use something less hazardous, which would still do the job
c)	Enclosure	Enclose/section off the work to eliminate or control the risk
d)	Guarding	Segregation of the user from the hazard
e)	Safe system of work	A system which reduces the risk to an acceptable level
f)	Written procedures	Written safe system of work, known/understood by those affected
g)	Supervision	Put in place adequate supervision Consider new/young staff
h)	Information/training	Guidance notes, instruction, notices, signs, training courses
i)	Personal protective Equipment (PPE)	Goggles, gloves, helmets, safety shoes

Note: Item (a) is the most effective, and item (i) the least. PPE should be used in conjunction with other control measures. It protects the individual and its effectiveness is very dependent on factors such as correct use, therefore guidance, training and supervision will be very important.

#### Step 4: Evaluate the level of risk

Risk is a combination of two things:

The level of harm that might be caused to a person if they were exposed to a hazard and the likelihood of that person being exposed to the hazard.

To determine the overall level of risk, the possible outcome or **severity** of harm and the **likelihood** that harm will occur, must be determined. Only tasks that's present a significant risk need to be evaluated.

#### **Possible Outcome/Severity**

For each hazard (with your control measures in place) you will need to estimate how harmful the hazard could be and assign a severity of harm rating as detailed below.

Negligible No treatment required

Minor e.g. On site first aid treatment required, nuisance irritation; minor symptoms, sent

home, observation

Moderate e.g. further medical advice sought, isolation required

Major e.g. requiring hospitalisation

Extreme e.g. Fatality/disability

You will then need to enter this into the 'Possible Outcome/Severity' column of your risk assessment, using the drop-down choices.

#### **Likelihood**

For each hazard, (consider existing controls), you need to determine how likely it is that the harm will occur and assign one of the following levels:

Very Unlikely So unlikely that probability is close to zero

Unlikely Could happen at some time

Possible Will probably happen at some time
Likely Will definitely happen at some time

Very likely Will happen, imminent

You will then need to enter this into the 'Likelihood' column of your risk assessment, using the drop-down choices.

#### Level of Risk

Once you have estimated a severity rating and decided how likely it is that the hazard will occur, the hazard can be assigned a risk level.

#### POSSIBLE OUTCOME/SEVERITY x LIKELIHOOD = RISK LEVEL

The Council's risk matrix (below) is a simple method for estimating risk levels, which uses the above formula and will help assessors in their decision making. To estimate the level of risk, read across the top of the matrix to your chosen severity rating and then down the left-hand side to your chosen likelihood rating. The level of risk is displayed as a number in the cell where they meet (for a quantitative rating) and displayed as a combination of low, medium, or high (for a qualitative rating). For example, where the likelihood is 'possible' and the worst likely outcome is 'major'; the hazard will present a risk rating of 12, which is a 'moderate' risk. A RAG rating has also been applied for better visual identification of the levels.

The numbered rating is a much more accurate means of determining risk than the 'finger in the air' approach of just choosing between low, medium, or high, without any scientific foundation. It shows more clearly how much more work needs to be done to reduce the risk further and the 'levels within levels' are a great aid in prioritising your actions. However, the use of low, medium, and high and the RAG rating is less complicated and more accessible to a wider audience. The matrix allows the best of both worlds.

You do not have to enter the numbers onto your risk assessment, but you can if you wish. It is acceptable to enter the descriptions instead, providing you still use the number rating shown in the matrix as the basis for the development of your preventative measures and the further reduction of risk. Ensure the matrix is made available to staff, so they can see the basis of your decision making.

				Possible Outo	ome/Severity		
	Risk Matrix		Negligible Minor 1 2		Moderate 3	Major 4	Extreme 5
	Very Unlikely	1	1 (Low)	2 (Low)	3 (Low)	4 (Low)	5 (Low)
kelihood	Unlikely	2	2 (Low)	4 (Low)	6 (Medium)	8 (Medium)	10 (Medium)
_ikeli	Possible	3	3 (Low)	6 (Medium)	9 (Medium)	12 (Medium)	15 (High)
	Likely	4	4 (Low)	8 (Medium)	12 (Medium)	16 (High)	20 (High)
	Very Likely	5	5 (Low)	10 (Medium)	15 (High)	20 (High)	25 (High)

#### <u>Is the level of risk tolerable?</u>

The level of risk should be evaluated with your preventative measures in place to determine if they are suitable and sufficient to reduce, or keep, the level of risk at a tolerable level and ultimately ensure that the activity is safe to continue. If your judgement is that the preventative measures are not enough, then further preventative measures will need to be decided upon and implemented. These will need to be added to your action plan and when complete, you will then need to reevaluate the level of risk to show that the actions have had the desired effect. Other factors, which have an impact on the likelihood of harm occurring, should also be considered, for example, unsafe acts, frequency, and duration of exposure to the hazard, and failure of machinery/services.

To make it easier to determine the urgency of the action, we need to allocate an action level to each level of risk. To make things more straight-forward, the levels of risk can be categorised as either low, moderate, or high and are described in figure 1 below. A RAG rating, as shown in the risk matrix and figure 1, can also be applied to make the process more intuitive.

Dependant on the level of risk, further control measures may be needed to further reduce the risk to an acceptable level. The Health and Safety Team can be contacted for advice and guidance to assist in the identification of suitable controls. The following actions should be taken for each level of risk.

Risk Level	Management actions required at each risk level
High (15-25)	<ul> <li>Urgent action/senior management attention is required to eliminate or reduce risk.</li> <li>Report to relevant management committee.</li> <li>Work should not be started or continued until the risk has been reduced.</li> <li>If it is not possible to reduce the risk, even with unlimited resources, activities must remain prohibited.</li> </ul>
Moderate (6-12)	<ul> <li>Aim to reduce the risk to 'low' if reasonably practicable to do so. If not practicable, try to reduce the risk to a lower scale of 'Moderate'</li> <li>There is a greater likelihood that detailed local safe working procedures will need to be written to make existing control measures more robust for moderate risks. E.g. advanced or increased frequency of training, increased supervisions</li> <li>If a control measure cannot be financed immediately it may be possible to plan for its implementation over a longer period, while other limited risk reduction measures are put in its place as an interim course of action.</li> </ul>
Low (6-10)	<ul> <li>No additional controls are required, but monitoring is required to ensure that the controls are maintained, and the risk does not increase</li> <li>Manage situation with routine procedures.</li> <li>Implement additional controls only if easy to implement and inexpensive</li> <li>Consideration may be given to a more cost-effective solution or improvement that imposes no additional cost burden.</li> </ul>

Figure 1.

#### Step 5: Introduce further control measures

If you determine that the level of risk is too high to continue safely with an activity or that it is possible to reduce risk further, add additional preventative measures into this column so that the risk can be reduced to a tolerable level. Enter the proposed timescales for completion in the final column.

#### 2 – Action Plan

Use the attached Health and Safety Action Plan to record all outstanding preventative measures that you still need to implement, stating responsible persons and timescales for completion. Regularly review and indicate when complete. Amend your risk assessment accordingly.

#### 3 – Communication

Communication is key and there's a lot of change that your staff, parents and pupils will need to digest and consider before returning to work. Continuous communication throughout this process will demonstrate that you're putting your staff's and pupil's safety at the heart of this decision.

## 4 – Review

The information around COVID-19 changes on a frequent basis and you will need to monitor the latest advice for any changes that could impact your activities. Frequently review you risk assessment to take account of these and amend as necessary.



# **COVID-19 Step 4 Model School Risk Assessment**

AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	.UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	Control By: guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
Social Distancing	Staff, Pupils, Parents, visitors, contractors	Transmission of virus  staff, pupil, and parent Anxiety about relaxed control measures	From the end of summer term 2021, in line with government guidance, the school will no longer be maintaining consistent class groups/bubbles during summer schools and when the new school term begins in September 2021.      Assemblies will resume in smaller phases from September 2021.      Specific arrangements to avoid mixing at breaktimes and lunchtime will be now in KS phases	Moderat e	Possible	Low	Monitor carefully	Autumn Term 2021
Contact Tracing	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>From 19<sup>th</sup> of July, it is DfE guidance that the school will no longer be expected to routinely undertake contact tracing, and this will instead be performed by NHS Track and Trace, who will work directly with the positive case.</li> <li>Children. pupils, students, and staff members who record a positive LFD or PCR test should let their setting know.</li> <li>Staff, pupils, or students (or the parent) are required to report the test result via the NHS Online reporting system for both negative, void, and positive test results. They should also report positive, negative, and void results to the setting.</li> <li>It is likely that NHS Track and Trace will be much stricter in their criteria for what</li> </ul>	Moderat e	Possible	Medium	Monitor very carefully. Offer LFT to contacts.  This needs to be very carefully monitored by the SLT	Autumn 2021
			much stricter in their criteria for what constitutes a close contact to keep these numbers as low as possible.				monitored by the SLT	



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			Contacts in school will be traced by NHS only if the positive case specifically identifies an individual as having close, prolonged contact, which will normally have occurred in a social setting rather than in normal day-to-day school activities e.g. sleepovers. Therefore, numbers are expected to be low.					
			Children. Pupils/students and staff members who record a positive LFD or PCR test must let the school know.					
			Staff, pupils/students (or the parent) are required to report all test results, whether negative, void, or positive, via the NHS Online reporting system.					
			The positive outcomes of NHS Track and Trace taking over the tracing process, will be reduced burden on schools and it will also ensure a consistent approach to identification of contacts across all locations, i.e. Prevention of under and overreporting.					
			The school will keep a simple record of pupils and staff known to be symptomatic or to have tested positive, so that they can provide the best possible assistance if contacted by NHS Track and Trace.					
			If the school does not agree with the close contacts that have been identified by one of their pupils/students or their legal guardian, they will escalate to the DfE helpline for advice.					
			The school may be contacted, by local health protection teams in response to a local outbreak, which is currently what					



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			happens in managing any other infectious diseases.  If the school knows that it has had several positive cases within a 14-day period, but has not been contacted by Track and Trace, the school will contact the dedicated DfE advice service on 0800 046 8687, who will escalate to our local health protection team if necessary and may advise the school to implement its outbreak management plan.  For our summer school provision, and other activities operating from the school premises over the summer, we will engage directly with NHS Track and Trace in the event of a positive PCR test result being reported to us					
Isolation of Positive Cases and close contacts.	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	From 16th August the school will help to communicate and implement the following isolation rules amongst its staff, pupils, contractors, and wider community:      Any person that develops Covid symptoms, and their household, must self-isolate and the positive person must immediately arrange a confirmatory PCR test.      If the confirmatory test is negative, they and the other members of their household can end their isolation (unless they have developed symptoms or been instructed to self-isolate by Test and Trace for other reasons).      If the confirmatory PCR test is positive, they and the other members of their household must self-isolate until 10 days after the date their symptoms began.	Moderat e	Possible	Medium	As cases locally and nationally remain very high, school will continue to monitor the situation very carefully.	Autumn 2021



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			Any person that has a positive lateral flow device (LFD) test, and their household, must self-isolate and the positive person must arrange a confirmatory PCR test within 48 hrs.					
			o If the confirmatory PCR test is taken within two days and the result is negative, they and the other members of their household can end their isolation (unless they have developed symptoms or been instructed to self-isolate by Test and Trace for other reasons).					
			<ul> <li>If the confirmatory PCR test is positive (or is taken more than two days after the LFD), they and the other members of their household must self-isolate until 10 days after the date of the LFD test</li> </ul>					
			Any person, irrespective of their age or vaccination status will be required to self- isolate for 10 days following a positive PCR test.					
			Children and young people under the age of 18 that are close contacts of positive cases will no longer be required to isolate, unless they receive a positive PCR test.					
			Children under 5 years old who are identified as close contacts would only be required to take a PCR test if the positive case is within their own household. Otherwise they will not need to isolate unless they are symptomatic.					
			Adults that have been double vaccinated and are identified as close contacts of positive cases will no longer be required to isolate, unless they receive a positive PCR test.					

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			Young people and double vaccinated individuals identified as close contacts will continue to be advised to take a PCR test, to detect the virus and variants of concern, and because they can still spread the virus, even if the health effects to them are negligible.      Children and Double vaccinated adults that are identified as close contacts of positive cases will not be required to isolate, whilst					
			<ul> <li>awaiting their PCR test result.</li> <li>Adults that have not been vaccinated yet, have chosen not to be vaccinated, cannot be vaccinated on medical grounds, or who have only received 1 dose of the vaccine so far, will be required to self-isolate immediately if identified as close contacts.</li> </ul>					
			18-year-olds will be treated as children until 4 months following their 18 <sup>th</sup> birthday with regards to being close contacts. This is to allow them sufficient time to become fully vaccinated. After this point, or if they choose not to be vaccinated, they will need to follow the same rules as adults and will need to self-isolate if identified as a close contact.					
Asymptomatic Testing	Staff, Pupils, visitors,	Transmission of virus after returning from mixing widely during summer break	<ul> <li>Staff and Secondary pupils will need to continue taking twice weekly rapid flow tests if attending summer school and other activities based on the school premises.</li> <li>The school will only continue to provide test kits over the summer period for the above.</li> <li>All secondary school pupils will receive 2 on-site lateral flow tests, 3 to 5 days apart, on their return to school in the autumn term</li> <li>The school will commence testing 3 working days before the start of term and will</li> </ul>	Moderat e	Possible	Medium	SLT to ensure staff are testing regularly	Autumn 2021



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			stagger the return of pupils over the first week to manage the delivery of testing.  Pupils will continue testing twice weekly at home until the end of September.  Staff will undertake twice weekly home tests until the end of September.					
Staff, pupils, or visitors attending site with COVID symptoms	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>Anyone with coronavirus (COVID-19) symptoms or who has tested positive in the previous 10 days will not be permitted into school.</li> <li>Anyone coming onto the site displaying COVID-19 symptoms, will be sent home, and asked to arrange a PCR test.</li> <li>Anyone who becomes unwell in school with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia) will be sent home and advised to follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'</li> <li>Individuals must self-isolate for 10 days from the date when their symptoms were first displayed and will not be permitted to return to school within that period unless their PCR test result is negative.</li> <li>If they still have a high temperature after 10 days, they will be asked to keep self-isolating until their temperature returns to normal.</li> <li>If they no longer have a temperature, but still have a cough or loss of sense of smell/taste, they will be permitted to return to school (this is because a cough or anosmia can last for several weeks once the infection has gone)</li> <li>In the event that a parent or guardian insists on a child with symptoms attending school,</li> </ul>	Moderate	Possible	Medium	SLT to monitor carefully and Covid. Protocols to continue for visitors to the school.	Autumn 2021



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			or refuses to arrange a PCR test, the school will ask the parent to isolate the child for 10 days and contact Public Health for possible intervention. Any such decision will be carefully considered in light of all the circumstances and the current public health advice.  • The school will keep a supply of home PCR testing kits. The use of these kits will be for a child or adult who:  • has developed symptoms whilst at school, and  • the school believes may have barriers to accessing a test elsewhere, and that by giving them a test kit directly, will significantly increase the likelihood of them getting tested, and  • where it is felt that if the individual were to be sent home without a kit, they would not receive a test at all.  • Close contact with an infected individual is defined as:  • If a child is awaiting collection after displaying symptoms, they will be moved to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate ventilation, and adult supervision if required. The room will have a vision panel and a clear line of site to ensure child safeguarding.  • If it is not possible to isolate them, they will be moved to an area which is at least 2 metres away from other people or temporary screens erected.  • If they need to go to the bathroom while waiting to be collected, they will use a separate bathroom if possible. Before					



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			being used by anyone else, the bathroom will be cleaned and disinfected following the cleaning procedures already outlined in this risk assessment.  If two metres cannot be maintained, the member of staff caring for the child while they await collection, must wear appropriate PPE (such as for a very young child or a child with complex needs).  Once they have vacated the premises, the area around the person with symptoms must be cleaned with normal household bleach following the COVID-19: cleaning of non-healthcare settings quidance to reduce the risk of passing the infection on to other people.  In an emergency, the school will call 999 if they are seriously ill or injured or their life is at risk.  Staff have been advised to wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. However, they will not need to self-isolate, unless they develop COVID-19 symptoms themselves or they have been requested to do so by NHS Test and Trace					
Wearing of Face Coverings and PPE	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>From the 19h July the government is removing the legal requirement to wear face coverings.</li> <li>However, the school will continue to ask staff and pupils aged 11 and above to maintain step 3 measures until the end of summer term 2021.</li> <li>From the end of Summer term 2021 the wearing of face coverings will no longer be required in classrooms or communal areas,</li> </ul>					



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			but the school will encourage staff, pupils over 11, and visitors to continue wearing them in enclosed and crowded spaces and when in contact with people they do not normally meet, including:  Whilst on dedicated school transport, Whilst on public transport  If staff wish to continue wearing face masks in certain situations, they will be allowed to do so.  In the event of a Covid outbreak, the school may be directed to reintroduce the mandatory wearing of face coverings. Please refer to the outbreak section at the end of the risk assessment.  Changing habits, cleaning and hygiene are still the most effective measures in controlling the spread of the virus. (Masks and face coverings can lead to a false sense of security; they can be used and fitted incorrectly: they can easily be contaminated through touch and increase the potential for transmission of the virus; they have a lifespan that is quickly exceeded.  Children, young people, and students whose care routinely already involves the use of PPE by staff due to their intimate care needs, will continue to receive their care in the same way  if a child, young person, or other learner becomes unwell with symptoms of coronavirus and needs direct personal care until they can return home, a fluid-resistant surgical face mask should be worn by the supervising adult, if 2 metres cannot be maintained.					



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			<ul> <li>If contact with the child or young person is necessary, then disposable gloves and a disposable apron should be worn by the supervising adult.</li> <li>If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection (e.g. goggles or a face shield) will also be worn</li> <li>When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and following guidance on how to put PPE on and take it off safely in order to reduce self-contamination.</li> <li>When using face masks, staff will be required to adhere to the following practice:         <ul> <li>cover both your nose and mouth</li> <li>do not allow to dangle around the neck when not in use</li> <li>do not touch once put on, except when carefully removed before disposal</li> <li>change when they become moist or damaged</li> <li>wear once and then discard - hands must be cleaned after disposal</li> </ul> </li> <li>Care for children with complex medical needs, such as tracheostomies?  There are a small number of medical procedures which increase the risk of transmission through aerosols (tiny droplets) being transferred from the patient to the care giver. These are known as aerosol generating procedures (AGPs).</li> <li>Staff performing AGPs in the school will follow Public Health England's personal protective equipment (PPE) guidance on aerosol generating procedures, and wear the correct PPE which is:</li> </ul>					

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Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>a FFP2/3 respirator</li> <li>gloves</li> <li>a long-sleeved fluid repellent gown</li> <li>eye protection</li> <li>The respirator required for AGPs must be fitted correctly (known as 'fit testing') by an individual trained to do this. All staff performing AGPs in the school have undergone face fit testing fit testing through the local Clinical Commissioning Group or lead nursing team.</li> </ul>					
Maintaining good personal hygiene	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>Frequent and thorough hand cleaning with soap and water or hand sanitiser is now regular practice in school, and this will continue regardless of any future easing of COVID measures, because of the broader health benefits gained since it was introduced.</li> <li>Staff and pupils will be encouraged and prompted to clean hands more often than usual and to wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly using disposable hand towels.</li> <li>Alcohol hand rub or sanitiser will be used at regular intervals in between washing with soap and water, or where running water and soap is not available or impractical to access.</li> <li>automatic hand sanitiser dispensers are installed in classrooms, communal areas, canteen, entrances and exits.</li> <li>Sanitiser has been sourced that contains at least 60-95% alcohol to be effective.</li> <li>As a minimum, pupils and adults will be expected to clean their hands when they arrive at school, when returning from</li> </ul>	Minor	Possible	Low	Regular hand washing to remain in place	2021-2022



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	.UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>breaks, when changing rooms, before and after eating, after toileting and after sneezing or coughing.</li> <li>Help is provided to children and young people who have trouble cleaning their hands independently, e.g. very young children or those with complex needs, especially where hand sanitiser is used, to prevent hazards such as ingestion.</li> <li>Those who can't use sanitiser, e.g. because they have contact dermatitis or for religious reasons (i.e. because of the alcohol content) will be provided with skin friendly cleaning wipes or supervised to go to a sink to use soap and water.</li> <li>Enough hand washing facilities are available in the school to allow safe controlled use, without overcrowding.</li> <li>The school has been in touch with public sector buying organisation partners (for example ESPO, YPO, NEPO) to ensure there are sufficient supplies of soap, antibacterial gel, disposable towels, and cleaning products if needed.</li> <li>Staff, parents, and pupils have been advised that there is no need for anything other than normal personal hygiene and washing of clothes following a day in an educational or childcare setting.</li> </ul>					
Maintaining good respiratory hygiene	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>Children and adults are encouraged not to touch their mouth, eyes, and nose</li> <li>Children and adults are encouraged to cough or sneeze into a tissue or elbow to and use bins for tissue waste promoting the 'catch it, bin it, kill it' approach</li> <li>Bins are emptied and appropriately cleaned at regular intervals throughout the day.</li> </ul>	Minor	Possible	Medium		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>Waste bins are lined with a plastic bag so that they can be emptied without contacting the contents or the inside of the bin.</li> <li>Staff are instructed that the emptying of bins and wastepaper baskets should be followed by hand washing.</li> </ul>					
Maintaining appropriate cleaning regimes	Staff, Pupils, Parents, visitors, contractors	Transmission of virus day to day operations	<ul> <li>As part of an enhanced cleaning regime, surfaces that children/young people are touching, such as toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters, are being cleaned more regularly than normal.</li> <li>As well as having an enhanced cleaning schedule delivered by the school's cleaning staff/contract cleaner (delete as appropriate), the school will adopt a 'clean as you go' policy, in which surfaces such as tabletops and resources are cleaned immediately after use. This is the most effective way of controlling the risk and all staff will be required to be part of this process.</li> <li>Appropriate cleaning products are provided, so that staff can frequently clean their workstations during the day.</li> <li>To enable the 'clean as you go approach' disinfectant spray and disposable cloths or disinfectant wipes will be made available in teaching spaces, offices, and resource centres.</li> <li>Spray bottles of disinfectant will be clearly labelled with their contents, health risks and method of use and kept out of the reach of children. Full details on the safe use of cleaning products can be found in the school's COSHH (Control of substances Hazardous to Health) assessment.</li> </ul>	Moderate	Possible	Medium		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	.UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>For individual and very frequently used equipment, such as pencils and pens, pupils and adults will have their own items and they will not be shared.</li> <li>The school will regularly reduce clutter and difficult to clean items.</li> </ul>					
Maintaining appropriate cleaning regimes cont.	Staff, Pupils, Parents, visitors, contractors	Transmission of virus of normal professional cleaning regime	For general cleaning where there has been no suspected or confirmed cases of COVID-19, the following cleaning principles will be applied:  Cleaning and Disinfection  Appropriately competent cleaning staff will be employed throughout the school day  An increased frequency of cleaning will be carried out using the school's standard detergent and disinfectant products.  Specific attention to all surfaces but especially those that are frequently touched, such as door handles, light switches, stair rails, work surfaces, remote controls, and electronic devices.  When cleaning, specific attention will be payed to bathrooms and kitchens.  Cleaning staff will only be required to wear the PPE that they would normally use for cleaning.  Laundry  Laundry items will be washed as they normally would, according to the manufacturer's instructions.	Moderate	Possible	Medium	Gloves, aprons, masks	



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Kitchens and communal canteens		
It is considered unlikely that COVID-19 is		
transmitted by food, but catering staff will be		
expected to follow the same good hygiene		
practice and wash their hands regularly with		
soap and water for at least 20 seconds		
before handling food.		
Crockery and eating utensils are not shared		
and are cleaned in between use in an		
industrial dishwasher or sterilising sink,		
guaranteeing sterilisation through		
temperatures in excess of 70 degrees		
centigrade.		
The school's catering contractors will continue to follow the Food Standard		
Agency's (FSA) guidance on good hygiene		
practices in food preparation, Hazard		
Analysis and Critical Control Point (HACCP)		
processes, and preventative practices (Pre-		
requisite Programs (PRPs)) and the school		
will regularly monitor their performance.		
<ul> <li>Lunch tables will be thoroughly cleaned with</li> </ul>		
detergent and disinfectant before each		
staggered lunch group.		
Bathrooms/Toilets		
Frequently touched surfaces, such as door	Cleaning Services	
handles and push plates, latches, toilet	Cleaning Services	
seats and taps, will be regularly cleaned.		
<ul> <li>Suitable hand washing facilities will be</li> </ul>		
made available including running water,		
liquid soap and paper towels or hand driers		
and will be regularly monitored and re-		
stocked.		
Waste		
Routine waste does not need to be		
segregated or stored for a period of time		
unless an individual in the setting shows		
symptoms of or tests positive for COVID-19 and will be disposed straight away and in		
the normal way.		
ano normai way.		



Maintaining	Staff,	Transmission	If someone with symptoms of, or confirmed	<b>Moderat</b>	<b>Possible</b>	Medium	
appropriate	Pupils,	of virus after	(COVID-19) has been in the school, the	e			
cleaning	Parents,	development of	following cleaning principles will be applied, as	_			
regimes cont.	visitors,	symptoms by	soon as they have vacated the area:				
	contractors	staff, pupils, or visitors on site	Personal Protective Equipment (PPE)				
		VISILOIS OII SILC	<ul> <li>As a minimum standard, cleaners will wear</li> </ul>				
			disposable gloves and an apron.				
			<ul> <li>If a higher level of virus is likely to be</li> </ul>				
			present (e.g. where surfaces have been				
			visibly contaminated with body fluids) then				
			additional PPE to protect the cleaner's eyes,				
			mouth and nose may be necessary. The				
			school will contact the local Public Health				
			England (PHE) Health Protection Team to				
			advise on this.				
			Cleaning and disinfection				
			Areas where a symptomatic person has				
			only passed through and spent minimal time				
			and which are not visibly contaminated with				
			body fluid, such as corridors, will be cleaned				
			thoroughly as normal.				
			<ul> <li>All surfaces that the person has made</li> </ul>				
			contact with, will be cleaned and				
			disinfected, including all potentially				
			contaminated and frequently touched areas,				
			such as bathrooms, door handles,				
			telephones, grab rails and stairwells.				
			Disposable cloths or paper roll and				
			disposable mop heads will be used to clean				
			all hard surfaces, floors, chairs, door				
			handles and sanitary fittings, following the				
			principle of 'one site, one wipe, in one direction'.				
			The following cleaning and disinfectant				
			solutions will be used:				
			a combined detergent and bleach				
			disinfectant solution at a dilution of				
			1,000 parts per million available				
			chlorine (ppm av.cl.)				
			o or				
			<ul> <li>a household detergent followed by</li> </ul>				
			bleach disinfection (1000 ppm av.cl.).				
			o or				
			o if an alternative disinfectant is used				
			within the organisation ensure that it is				
			effective against enveloped viruses		]	]	



	Cleaning products will not be mixed together
	as this can create toxic fumes.
	The manufacturer's instructions for dilution,
	application and contact times for all
	detergents and disinfectants with be strictly
	adhered to
	Cleaners will Avoid creating splashes and
	spray when cleaning.
	When items cannot be cleaned using
	detergents or laundered, for example,
	upholstered furniture and mattresses, steam
	cleaning will be used.
	Cleaners will wash hands regularly with
	soap and water for 20 seconds, and after
	removing gloves, aprons and other
	protection used while cleaning.
	After cleaning, disposable gloves and any
	cloths and mop heads used will be disposed
	of and put into waste bags as outlined
	below.
	Laundry
	Items will be washed in accordance with the
	manufacturer's instructions.
	The warmest water setting will be used, and
	items will be allowed to dry completely.
	Dirty laundry that has been in contact with
	an unwell person can be washed with other
	people's items.
	To minimise the possibility of dispersing
	virus through the air, dirty laundry will be
	handled gently and not shaken prior to
	washing.
	Any items that are heavily contaminated
	with body fluids and cannot safely be
	with body funds and carried safety be
	cleaned by washing should be disposed of,
	following the methods outlined below.
	Anything used for transporting laundry with
	be cleaned and disinfected following the
	methodology described above.
	Waste
	Personal waste from individuals with symptoms
	of COVID-19 and waste from cleaning of areas
	where they have been (including PPE,
i l	disposable cloths and used tissues) will be:



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Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>put in a plastic rubbish bag and tied when full.</li> <li>placed in a second bin bag and tied.</li> <li>put in a suitable and secure place and marked for storage until the individual's test results are known.</li> <li>Waste will be stored safely and kept away from children.</li> <li>It will not be put in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours.</li> <li>If the individual tests negative, waste will be put in with the normal waste</li> <li>If the individual tests positive for COVID-19, the waste will be stored for at least 72 hours and then put in with the normal waste</li> <li>If an emergency occurs, in which waste needs to be removed before 72 hours has elapsed, it will be treated as Category B infectious waste and will be kept separate from other waste and collection will be arranged by a specialist hazardous waste contractor</li> </ul>					
Keeping paces well ventilated	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	Adequate ventilation can reduce how much virus is in the air and can therefore help reduce the risk from aerosol transmission. However, it has minimal impact on droplet transmission between individuals in close contact or surface contamination, which are still the main transmission vectors for the virus.      Efficient ventilation should be treated as one control measure among many and is not solution on its own. The school will ensure that mechanical ventilation systems are maintained and running effectively, with	Moderat e	Possible	Medium	Caretaker to ensure rooms ventilated daily	Autumn 2021



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	.UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
Staff and Pupils that are clinically extremely vulnerable (CEV)	Staff, Pupils, Parents, visitors, contractors	Increased vulnerability to virus	fresh air only supplied or a combination of fresh air and recirculated air.  • Where mechanical ventilation systems are not working or not fitted, natural ventilation will be used (e.g. opening windows and propping open doors to classrooms from corridors and directly to the outside where possible in ground floor classrooms, weather permitting.  Site security protocols will be amended as necessary to allow external doors to be kept open if necessary and fire procedures will be amended to make it the responsibility of staff to close doors behind them and prevent the spread of fire in the event of an emergency evacuation.  • All CEV children and young people are to attend school unless they have been advised not to by their GP or clinical specialist, or because they have tested positive for Coronavirus.  • Staff who are CEV will be required to attend work as normal if it is not possible or practical for them to work from home.  • Those staff that are CEV may wish to take extra precautions within their own control to protect themselves, both in and out of work, and the school will direct them to the CEV guidance to help minimise exposure to the virus Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19 - GOV.UK (www.gov.uk)  • The school will support the DHSC in encouraging vaccine take up, because this is ultimately the primary solution for protecting all staff.	Negligibl e	Unlikely	Low		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES		EVAL	UATING	AND REDUCING RISK	
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
Those who are anxious about returning to school			The school will ensure that support is in place to address the concerns of anyone that is anxious about returning. The school will discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school and the requirement under national guidance. The school will be clear with parents that pupils of compulsory school age must be in school unless a statutory reason applies (for example, the pupil has been granted a leave of absence, is unable to attend because of sickness, is absent for a necessary religious observance etc). The school will utilise sources of support to help those experiencing emotions such as anxiety or stress, such as Promoting and supporting mental health and wellbeing in schools and colleges - GOV.UK (www.gov.uk)	Minor	Possible	Low		
Communicati on and consultation	Staff, Pupils, Parents, visitors, contractors	Lack of awareness of national and local COVID measures leading to increased transmission of virus	This risk assessment has been shared and consulted on with staff and staff representatives to ensure it is practicable and has been posted on the school's website for transparency.  It has been explicitly communicated to staff, children/young people, parents, carers or any visitors, such as suppliers, not to come on site if they are displaying any symptoms of coronavirus (following the COVID-19: guidance for households with possible coronavirus infection)  Recommendations have been made to parents and young people on transport to and from school (including avoiding peak times) and they have been referred to	Moderat e	Possible	Medium		Autumn 2021



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			Coronavirus (COVID-19): safer travel guidance for passengers  • Staff have been informed about the plans (for example, safety measures, timetable changes and staggered arrival and departure times), including discussing whether training would be helpful  • Contractors and suppliers have been contacted to ensure they can support the school's plans for opening, e.g. maintenance, cleaning, catering, food supplies, hygiene suppliers  • It has been discussed and agreed with cleaning contractors/staff the additional cleaning requirements and the additional hours to allow for this  • Children/young people will be encouraged to learn and practise good hygiene habits through games, songs, and repetition.					
Foreign travel during summer break	Staff, Pupils, Parents, visitors, contractors	Increased transmission of virus	<ul> <li>It has been made explicit to staff, parents and pupils that if they are travelling abroad for the summer holidays, that they will be required to adhere to the current testing and quarantine rules of the country being visited and the UK when returning. The latest guidance on quarantine coronavirus (COVID-19): how to self-isolate when you travel to the UK has been share with all parties.</li> <li>If families are returning from foreign travel towards the end of the summer break and they are required to quarantine, that hey inform the school and they must not return to school until the 14-day quarantine period has finished.</li> <li>staff will need to be available to work in school from the start of the autumn term. Therefore, the school has discussed leave</li> </ul>					



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
Educational	Staff, Pupils, Parents, visitors, contractors	Increased risk of transmission Risk of trip cancellation and significant financial loss	arrangements with staff before the end of the summer term to avoid this occurrence as far as is practicable.  There is also a risk that even where a member of staff's official return date provides sufficient time for quarantine, that their travel arrangements could be disrupted due to factors arising beyond their control in relation to coronavirus (COVID-19), such as the potential for reinstatement of lockdown measures in the place they are visiting.  If it is not possible to avoid a member of staff having to quarantine during term time, the school will consider if it is possible to temporarily amend working arrangements to enable them to work from home.  Domestic residential visits and international visits will recommend from the beginning of September 2021. However, the school will not organise any such trips unless it can be guaranteed that financial protection against cancellation for COVID reasons is provided, or the ability to reschedule free of charge.  non-residential domestic educational visits will continue as normal.  These trips will include any trips for pupils with SEND connected with their preparation for adulthood (e.g. workplace visits, travel training etc.).  Trips will be carried out in accordance with all current council trip planning and risk assessment measures in place.  Specific protective measures in respect of COVID-19 will remain in place, e.g. enhanced handwashing and respiratory hygiene, and the COVID-secure measures in place at the destination.	Moderat e	Possible	Medium	SLT to monitor the residential trips booked for the new academic year.	2021-2022



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	Control By: guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>The school will also make use of outdoor spaces in the local area to support delivery of the curriculum.</li> <li>In the event of an outbreak at the school, it may be necessary to put a hold on trips.</li> </ul>					
Extra- curricular provision	Staff, Pupils, Parents, visitors, contractors	Transmission of virus	<ul> <li>The school will resume breakfast and after-school provision, from the start of the autumn term as this will aid the wider running of the school when returning to full capacity.</li> <li>The school will consult the guidance produced for summer holiday childcare, available at Protective measures for out-of-school settings during the coronavirus (COVID-19) outbreak Protective measures for out-of-school settings during the coronavirus (COVID-19) outbreak for support in planning extra-curricular provision.</li> <li>Parents using childcare providers or out of school activities for their children, have been encouraged them to seek assurance that the providers are carefully considering their own protective measures, and only use those providers that can demonstrate this. As with physical activity during the school day, contact sports should not take place.</li> </ul>	Moderate	Possible	Medium		Autumn 2021
Specific curriculum related hazards	Staff Pupils	Increased risk of transmission	The music department risk assessment will be reviewed to explore preventative measures further and provide greater detail on the COVID-19 controls.     External music providers, e.g. peripatetic teachers and the music service will be asked to review their own risk assessments in respect of COVID-19 and consult on them with the school.	Moderat e	Possible	Medium		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	Control By: guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>Physical Activity</li> <li>The P.E. department risk assessment will be reviewed to explore preventative measures further and provide greater detail on the COVID-19 controls.</li> <li>The school will continue to work with external coaches, clubs, and organisations for curricular and extra-curricular activities where it is satisfied that this is safe to do so. Schools should consider carefully how such arrangements can operate within their wider protective measures. External providers will be asked to review their own risk assessments in respect of COVID-19 and consult on them with the school.</li> <li>Risk assessments for physical activity will be reviewed and the school will refer to the following sources of advice:</li> <li>Guidance on the phased return of sport and recreation</li> <li>Guidance from Sport England on grassroot sport</li> <li>Association for Physical Education.</li> <li>Youth Sports Trust</li> </ul>					
Behaviour	Staff, Pupils, Parents, visitors, contractors	Increased challenging behaviour caused by the emotional impact of coronavirus, leading to unsafe acts.	Behaviour and a breakdown of discipline can have a direct and adverse effect on safety and health and the school has therefore updated its Behaviour Policy with new rules, setting clear, reasonable, and proportionate expectations of pupil behaviour considering COVID-19. The guidelines at Behaviour and discipline in schools has be referred to in preparation of the policy.  The school will communicate these new rules clearly to staff, pupils and parents prior to the beginning of the autumn term, setting	Moderat e	Possible	Medium	SLT and Play Therapist to work together to support pupils and families	Autumn 2021



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			out clearly the consequences for poor behaviour, deliberate breaking of the rules and how those rules will be enforced, what sanctions will be in place, and how good behaviour will be rewarded.					
Outbreaks of COVID-19	Staff, Pupils, Parents, visitors, contractors	Increased transmission of the virus, and/or increased severity of health risks	<ul> <li>The school will keep their Business         Continuity and Emergency Response and         Recovery plans up to date in preparation for         outbreaks of COVID-19, including how         every child, pupil or student will continue to         receive quality education and care         The LA's outbreak management plan for         schools will be closely followed         According to current guidance, if the school         has several confirmed cases within 14 days,         this may indicate an outbreak and the         school will work closely with the LA's Public         Health team and if necessary the North         West London Health Protection Team who         will advise if additional action is required.</li> <li>COVID-19 is a virus that we will have to live         with going forward, and therefore it is likely         that outbreaks will be determined by the         strain of coronavirus identified in the         positive cases, i.e. VOCs, which are         new/unknown, or for which there is         evidence of greater health risks.</li> <li>For outbreaks affecting a specific area, or         the borough as a whole, ministers may offer         the area enhanced response package, in</li> </ul>	Moderate	Possible	Medium		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASURES	EVALUATING AND REDUCING RISK				
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supervision, safety equipment, safe working procedures, hygiene monitoring etc.	Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	Further preventative measures to control the risk	Proposed Timescale/ date Completed
			<ul> <li>which case the LA and school will follow any instructions given.</li> <li>If an outbreak is confirmed, the LA's Director of Public health might advise the school to temporarily revert to previous risk assessments (e.g. Step 3) and reintroduce some control measures.</li> <li>For outbreaks at school level, this will be managed on a case by case basis in conjunction with the LA's Public Health Team. The actual measures necessary may vary from case to case, but the school's Business Continuity and Emergency Response and Recovery plans have been prepared for the following possibilities:</li> </ul>					
Outbreaks - Testing			<ul> <li>Reintroduction of asymptomatic testing</li> <li>Pupils/students to increase the use of home testing</li> <li>Staff advised to increase the use of home testing</li> </ul>	Negligibl e	Unlikely	Low		
Outbreaks – Social Distancing			It may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups.	Moderat e	Possible	Medium		
Outbreaks – Face Coverings			The temporary wearing of face coverings by staff in communal areas and/or classrooms  The temporary wearing of face coverings by pupils/students in communal areas and/or classrooms	Please Select	Please Select	Please Select		
Outbreaks - Sheilding			In the event of a major outbreak or introduction of a VoC that poses a significant risk to individuals on the shielded patient list (SPL) shielding may be reintroduced. This can only be done by national government and a major outbreak will is likely to be one that is area or	Moderat e	Possible	Medium		



AREA OF CONCERN	AT RISK	HAZARD	CONTROL MEASUR	RES	EVALUATING AND REDUCING RISK					
Consider: premises work, equipment, specific tasks	People at risk	How might harm be caused	<b>Control By:</b> guards, training, supersafety equipment, safe working prohygiene monitoring etc.		Possible Outcome/ Severity	Likelihood	Risk rating: High Medium Low	-	eventative measures ontrol the risk	Proposed Timescale/ date Completed
			borough-wide, rather than an indi	ividual						
Outbreaks - Attendance			<ul> <li>Attendance restrictions will only be considered in extreme circumstar as a last resort. Any decision to de be based on scientific and public advice.</li> <li>If necessary, high quality remote will be provided to those pupils/st in attendance.</li> <li>Priority will be given to vulnerable people and the children of critical attend school according to their numetables.</li> </ul>	nces and lo so will health education tudents not e young workers to	Moderat e	Possible	Medium			
Outbreaks – Educational Visits			Residential visits will be limited o hold.	r put on	Moderat e	Possible	Medium			
Outbreaks – Events			Events such as open days, transitaster days, performances and far have to be postponed.		Moderat e	Possible	Medium			
Outbreaks – Visitors to site			Only essential visitors able to atter i.e. those required for the continu operation of the school, for reaso education, safety, and welfare.	ed	Moderat e	Possible	Medium			
Signed: Name:	Miss J A Harte			Assess 09.08.2	ment Da 2021	te:		Further action required: Yes, a monitoring is on and daily by SL	going	



# **COVID-19 Health & Safety Action Plan**

RA Ref:	Details of Corrective Action Requ	uired	Timescale	Responsible Person	Closed Out
	PPE and Liquid resistant masks to be followed up		September 2021	Headteacher	
Addition Comm	ents				
Signed	l: 	Date:			
Signed	d: 	Date:			