

Risk Assessment Covid-19 Reopening Schools March 8th 2021

This example risk assessment is not exhaustive and should be used as a guide for typical COVID-19 risk management considerations and controls.

You must ensure robust arrangements are in place to control the risks if adopting any part of this assessment. It is important this assessment and proposed action is consulted with employees and their representatives. **Please record and highlight your additional risk control measures / adaptations you have made for your individual school.** Please record that employees have been consulted and made aware of the contents of the risk assessment.

Step 1: Identify the hazards. **Step 2:** Decide who might be harmed and how. **Step 3:** Evaluate the risks and decide on precautions. **Step 4:** Record your findings and implement them. **Step 5:** Review your assessment periodically and where there have been significant changes or any learning from accidents / incidents or work-related ill health. Risks should be reduced to as low as reasonably practicable.

Having assessed their risk, schools must work through the below system of controls, adopting measures to the fullest extent possible in a way that addresses the risk identified in their assessment, works for their school and allows them to deliver a broad and balanced curriculum for their pupils, including full educational and care support for those pupils who have Special Educational Needs and Disabilities (SEND).

Prevention

You must always:

- 1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend school.
- 2) Ensure face coverings are used in recommended circumstances, to improve safety, LBBB recommends the use of face masks for staff.
- 3) Ensure everyone is advised to clean their hands thoroughly more often than usual.
- 4) Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach.
- 5) Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents.
- 6) Consider how to minimise contact across the site and maintain social distancing wherever possible.
- 7) Always keeping occupied spaces well ventilated.

In specific circumstances:

- 8) Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary.
- 9) Promote and engage in asymptomatic testing, where available.

Response to any infection

You must always:

- 10) Promote and engage with the NHS Test and Trace process.
- 11) Manage and report confirmed cases of coronavirus (COVID-19) amongst the school community.
- 12) Contain any outbreak by following local health protection team advice.

This risk assessment template must be completed taking into full consideration current government guidelines for schools:
[Schools coronavirus operational guidance.pdf_march2021](#)

How to use:

There are mandatory fields (in black text) that are required to stay in your risk assessment. There are also fields that may or may not apply to your school area (in grey text). The grey sections may apply now or may apply in the future.

Each greyed out point must be fully considered and where applicable and in place at your school, this would be demonstrated by turning the grey text into black text. It is expected that all relevant suggested controls have been fully implemented where they apply to your school. If a control is not relevant and does not apply, please leave it in place as grey text.

Do not just copy this example, as that may not satisfy the law and may not protect your employees, pupils and visitors. You must think about specific hazards and controls relevant to your school. At the bottom of most sections of the Risk Assessment template, there is space under the heading 'Please add any additional specific arrangements applicable to your school' for you to add items specific to your school which may not be included within the generic template.

Risk Assessment Covid-19

Activity/Person/Location	Managing COVID-19 risks
School	Education/School
Head Teacher	Rachel Anthony
Assessor(s) including employee representative	Jade Abrahams - SBM
Date of assessment	March 2021
Review date (Monthly)	On-going

Key	
	Social Distancing to minimise potential spread of COVID-19
	Hygiene protocols to minimise potential spread of COVID-19
	Additional considerations to manage and control risk

Resultant Risk Rating	
Please tick	
High	<input type="checkbox"/>
Medium	<input type="checkbox"/>
Low (normal)	<input type="checkbox"/>

Risk rating to be applied by each school following implementation of control measures. Select a risk rating to reflect the overall risk once control measures are in place. You are aiming to ensure that the risk is as low as reasonably practicable (ALARP)

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
1. There is a confirmed case of coronavirus in a setting	Staff, pupils, contractors, visitors Possible transmission of the virus between staff to staff, Staff to pupil, pupil to pupil and into the wider community. However, transmission of virus between pupil to pupil and between pupil to staff is negligible. People can catch the virus from others who are	 Protocol in place in line with Guidance for schools and educational settings contains detailed guidance for settings on: cleaning, testing and tracing, PPE and what settings should do in response to a case being confirmed. Schools should refer to this guidance and continue to follow measures, along with handwashing, cleaning, and self-isolation to lower the risk of transmission. Child / young person / staff member with symptoms Anyone with symptoms should be advised NOT to come to the school premises, they should be advised to get tested and self-isolate for 10 days (along with their household). If a child, young person or staff member displays symptoms of coronavirus in a setting, they should be sent home and advised to get a test and self-isolate for 10 days. Their fellow household members should self-isolate for 10 days. Stay at home guidance is available here . All staff and students who are attending an education or childcare setting will have access to a test if they display symptoms of	Please consult the new guidance on Schools opening to carry out this risk assessment. Ensure HT & SBM follow development of guidance for the full opening of schools in September, updating risk assessment accordingly.	HT & SBM	Ongoing	

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	<p>infected in the following ways:</p> <ul style="list-style-type: none"> • virus moves from person-to-person in droplets from the nose or mouth spread when a person with the virus coughs or exhales • the virus can survive for up to 72 hours out of the body on surfaces which people have coughed on, etc • people can pick up the virus by breathing in the droplets or by touching contaminated surfaces and then touching their eyes or mouth • condExposure to the virus may result mild or moderate symptoms e.g. coughing, fever or shortness of breath, more 	<p>coronavirus and are strongly encouraged to get tested in this scenario. Employee refusal to arrange a test will need to be discussed with the manager and the employee. If the child, young person or staff member tests negative, they can return to their setting and the fellow household members can end their self-isolation.</p> <p>If a child with symptoms is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.</p> <p>In exceptional circumstances, if parents or carers cannot arrange to have their child collected, if age-appropriate and safe to do so the child should walk, cycle or scoot home. If this is not possible, alternative arrangements may need to be organised by the school i.e. a COVID-19 taxi may be available or the local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver, who must be made aware that the individual has tested positive or is displaying symptoms.</p> <p>If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.</p> <p>PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) guidance.</p> <p>Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in</p>	<p>Seating spaced out in reception area. PPA room/learning mentor office</p> <p>Check walk home alone permissions before child goes home.</p> <p>Send out instructions for the use of PPE to all staff.</p>	<p>Admin</p> <p>SLT</p>	<p>Ongoing</p> <p>04.03.21</p>	

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Covid-19 Outbreaks on site	<p>severe symptoms include pneumonia in both lungs which can lead to death. The children are generally asymptomatic or have mild symptoms only and the transmission rate to other children or adults is low or negligible</p>	<p>which case, they should arrange a test) or if the symptomatic person subsequently tests positive or they have been requested to do so by NHS Test and Trace.</p> <p>Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household bleach after they have left to reduce the risk of passing the infection on to other people. See the COVID-19: cleaning of non-healthcare settings guidance.</p> <p>Child / young person / staff member with a positive test result</p> <p>If there is a confirmed case of coronavirus (a child, young person or a staff member with a positive test result) in a setting, they should be sent home and advised to self-isolate for 10 days. Their fellow household members should self-isolate for 10 days. Stay at home guidance is available here.</p> <p>Where the child, young person or staff member tests positive, the rest of their class or bubble within their childcare or education setting should not be sent home unless the school has spoken to the local Public health team and London Coronavirus Response Centre. The other household members of that wider class or bubble do not need to self-isolate unless the child, young person or staff member they live with in that bubble subsequently develops symptoms.</p> <p>As part of the NHS Test and Trace programme, if other cases are detected within the cohort or in the wider setting, Local Public Health Team has put Outbreak Action Cards and SOPs in various settings on LBBB's website https://www.lbbd.gov.uk/coronavirus-covid-19. Please follow these.</p>	<p>Monitor the movement of children within their bubbles in intervention groups & clubs.</p> <p>Seating plans completed and in class folders</p>	<p>SLT</p> <p>CT</p>	<p>Ongoing</p> <p>WB 8th March</p>	

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		<p>In case of an outbreak (please see definitions below), contact the local Public health team and PHE London Coronavirus Response Cell (LCRC) as below:</p> <p>Contact Local PH team on pauline.starkey@lbbd.gov.uk</p> <p>They will</p> <ul style="list-style-type: none"> • Respond to your enquiries • Give advice if there are suspected coronavirus cases (i.e. before test result back) • Gives ongoing support to settings managing outbreaks <p>Contact PHE (LCRC) on 0300 303 0450</p> <p>They will</p> <ul style="list-style-type: none"> • Give initial advice when there is a person with confirmed coronavirus in a high-risk setting • Want organisations to notify them of all confirmed (test positive) cases in high risk local settings (Notifications to be made via LCRC@phe.gov.uk or call 03003030450) • If PHE confirm that there is an outbreak in any setting, they will still: <ul style="list-style-type: none"> ○ Support setting to complete an outbreak risk assessment ○ Run through infection prevention and control check list ○ Support with communications, if needed ○ Alert local authority public health team who will provide ongoing support. ○ Establish a multi-agency incident management team (if required) 				

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		<p>The LA will undertake an outbreak risk assessment to help mitigate the risks. (Please note this is different from the Individual RA and Schools RA already undertaken)</p> <p>Where settings are observing guidance on COVID-19: infection prevention and control (IPC) , which will reduce risk of transmission, closure of the whole setting will not generally be necessary.</p>  <p>Outbreak definition as follows. COVID-19 Education Setting Cluster and Outbreak Definitions.</p> <p>Cluster definition: Two or more test-confirmed cases of COVID-19 among individuals associated with a specific non-residential setting with illness onset dates within a 14-day period.</p> <p>(In the absence of detailed information about the type of contact between the cases).</p> <p>End of cluster No test-confirmed cases with illness onset dates in the last 14 days.</p> <p>Outbreak definition:</p> <p>Two or more test-confirmed cases of COVID-19 among individuals associated with a specific non-residential setting with illness onset dates within 14 days, and one of:</p> <ul style="list-style-type: none"> • identified direct exposure between at least 2 of the test-confirmed cases in that setting (for example under one metre face to face, or spending more than 15 minutes within 2 metres) during the infectious period of one of the cases 	<p>Contact Local Public Health Team and LCRC in case of an outbreak. Please visit the council's website to access the Outbreak Action Cards and SOP for your setting</p>			

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		<ul style="list-style-type: none"> when there is no sustained local community transmission - absence of an alternative source of infection outside the setting for the initially identified cases <p>End of outbreak No test-confirmed cases with illness onset dates in the last 28 days in that setting. Note: The threshold for the end of an outbreak is higher than the end of a cluster.</p> <p>covid-19-epidemiological-definitions-of-outbreaks-and-clusters</p>				
2. Testing and contact tracing	Staff, Pupils, visitors, contactors (Risk - as set out in section 1)	<p>The NHS Test and Trace programme will play an important role in helping to minimise the spread of coronavirus in the future. It will also include more traditional methods of contact tracing if a child, young person or parent test positive.</p> <p>All students will begin to return to face-to-face education on 8 March with the following testing measures in place:</p> <ul style="list-style-type: none"> all primary school children will return on Monday 8 March. Primary school staff will continue to take 2 rapid COVID-19 tests each week at home all secondary school and college students will take three COVID-19 tests as they return to the classroom from the 8 March at existing school testing facilities. Schools and colleges will have discretion on how to test students over that week to enable their return to the classroom. After the initial programme of three tests in school or college, students will be provided with 2 rapid tests to use each week at home secondary school and college staff will also be provided with 2 tests to use each week at home <p>Schools must ensure they understand the NHS Test and Trace process and how to contact their local Public Health England health protection team. Schools must ensure that staff members and</p>	<p>Once the app is available, all staff, parents, visitors, contractors and pupils with a smart phone should download the app.</p> <p>Tests completed Mon & Thurs each week- Part time staff advised days to complete tests.</p> <p>Staff report results to school through Office 365 Forms.</p> <p>Positive results – Report to Rachel by 7:30am and complete form.</p>	All staff	Weekly	Ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>parents/carers understand that they will need to be ready and willing to:</p> <ul style="list-style-type: none"> • book a test if they are displaying symptoms. Staff and pupils must not come into the school if they have symptoms and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit • provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace • self-isolate if they have been in close contact with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19) <p>Coronavirus testing is now available to everyone in England and Wales with symptoms (a new, continuous cough; high temperature; or a loss of or change in your normal sense of smell or taste)</p> <p>Who can get a free test (Please also check your local council website for eligibility criteria as it could be different: https://www.lbbd.gov.uk/get-a-coronavirus-test)</p> <p>You can only get a free NHS test if at least one of the following applies:</p> <ul style="list-style-type: none"> • you have a high temperature • you have a new, continuous cough • you've lost your sense of smell or taste or it's changed • you've been asked to get a test by a local council • you're taking part in a government pilot project 	<p>Send letter from MC to parents advising testing prior to school reopening and frequently while schools are open.</p>	<p>SLT</p>	<p>02.03.21</p>	<p>02.03.21</p>

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		<ul style="list-style-type: none"> • you've been asked to get a test to confirm a positive result <p>You can also get a test for someone you live with if they have symptoms.</p> <p><u>How to book a test</u></p> <ul style="list-style-type: none"> • People can register for a test at www.nhs.uk/coronavirus , after checking their symptoms. • Those who do not have any access to the internet, or who have difficulty with the digital portals, can ring a new 119 service to book their test. People with hearing or speech difficulties can call 18001 119. • Tests for essential workers are prioritised over the tests available for the wider public through the NHS. • If you are an essential worker, or live with an essential worker you can apply via the testing for essential workers link • The list of essential workers is available here. <p>When to get a test</p> <p>If you have symptoms, get a test as soon as possible.</p> <p>Book a visit to a test site to have the test today. Test sites are open 7 days a week. Order a home test kit if you cannot get to a test site.</p> <p>England and Northern Ireland</p> <p>You need to get the test done in the first 8 days of having symptoms.</p> <p>On days 1 to 7, you can get tested at a site or at home. If you're ordering a home test kit on day 7, do it by 3pm.</p> <p>On day 8, you need to go to a test site - it's too late to order a home test kit</p>	<p>Staff members to inform SLT is they are displaying symptoms</p>	<p>All staff</p>	<p>Ongoing</p>	<p>Ongoing</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		Schools should ask parents and staff to inform them immediately of the results of a test to take appropriate actions as highlighted in section 1 above.				
3. Contingency Plan to deal with an outbreak	Staff, Pupils, visitors, contactors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> If a local area sees a spike in infection rates that is resulting in localised community spread, appropriate authorities will decide which measures to implement to help contain the spread. The Department for Education will be involved in decisions at a local and national level affecting a geographical area, and will support appropriate authorities and individual settings to follow the health advice. For individuals or bubbles of self-isolating pupils, remote education plans will be put in place. These should meet the same expectations as those for any pupils who cannot yet attend school at all due to coronavirus (COVID-19). See guidance on remote education support. In the event of a local outbreak, the PH health protection team or local authority may advise a school or number of schools to close temporarily to help control transmission. Schools will also need a contingency plan for this eventuality. This may involve a return to remaining open only for vulnerable children and the children of critical workers, and providing remote education for all other pupils. <p><i>Please add any additional specific arrangements applicable to your school.</i></p>	<p>Remote learning policy in place.</p> <p>Laptops loaned to children without devices.</p>	All staff SLT	Nov 2021 Ongoing	Nov 2021 Ongoing
4. Communication strategy (communication to parents / guardians)	Staff, Pupils, visitors, contactors (Risk - As set out in section 1)	 <p>Protocol in place and includes:</p> <ul style="list-style-type: none"> Advice to parents on local arrangements within the school for the wearing of school uniform. Advise parents that the uniform does not need to be cleaned any more often than usual, nor do they need to be cleaned using methods which are different from normal 	<p>Update website with plans for reopening in March 2021</p> <p>Send out letter to Parents</p>	SLT SLT	04.03.21 02.03.21	04.03.21 02.03.21

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Advise parents to limit the amount of equipment their children bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery, mobile phones and bags Advise parents that if their child needs to be accompanied to the education or childcare setting, only one parent should attend If parents of pupils with significant risk factors are concerned, we recommend schools discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school Discuss with parents the types of bubbles that will be used within the school, this being either classroom, year bubbles or mega-bubbles Advise parents that wearing face coverings is required at all times on public transport and shops (for children over the age of 11) or when attending a hospital as a visitor or outpatient. <p>Secondary schools</p> <ul style="list-style-type: none"> It is recommended that face masks should be worn by staff when moving around the premises, in classrooms (where social distancing cannot be maintained) outside of classrooms, such as in corridors and communal areas. Face masks do not need to be worn by staff when outdoors on the premises. Where pupils in year 7 (which would be children who were aged 11 on 31 August 2020) and above are educated, it is now recommend that face coverings should be worn by pupils when moving around the premises, in classrooms, outside of classrooms, such as in corridors and communal areas. Face coverings do not need to be worn by pupils when outdoors on the premises. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons. The school will have a small contingency supply of face coverings for those pupils that forget their face covering, are struggling to access a face covering or unable to use their face covering as it is damp, soiled or unsafe. 	<p>via ParentMail with March updates and reminders of ongoing practises in school.</p> <p>Review ParentMail connections.</p>	Admin	Weekly	Ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Those who rely on visual signals for communication, or communicate with or provide support to such individuals, are currently exempt from any requirement to wear face coverings in schools or in public places. Face visors or shields should not be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in reducing aerosol transmission when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately. Some individuals are exempt from wearing face coverings, where they cannot put on, wear or remove a face covering because of a physical impairment or disability, illness or mental health difficulties or to speak to or provide help to someone who relies on lip reading, clear sound or facial expression to communicate. <p>Primary schools</p> <ul style="list-style-type: none"> In primary schools, it is recommended that face masks should be worn by staff and face coverings should be worn by visitors in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). Children in primary school do not need to wear a face covering. <p>New ingress and egress procedures: Parents coming onto school site requested to wear face masks on arrival.</p> <p>This additional precautionary measure for a limited time during this period of high coronavirus (COVID-19) prevalence in the community. These measures will be in place until Easter. As with all measures, it will be kept under review.</p> <ul style="list-style-type: none"> Face masks and other types of Personal Protective Equipment i.e. gowns, gloves, visors and goggles will only be required in very rare situations where the risk assessment determines that they should be worn or are already being worn by members of staff to meet the 	<p>Face coverings should be worn by all members of staff in communal areas.</p> <p>Commutated to Parents via Parent Mail</p> <p>Cover supervisors and PPA Teachers to wear face coverings in class.</p>	<p>All staff</p> <p>SLT</p> <p>Cover staff</p>	<p>Ongoing</p> <p>Summer 2</p> <p>Ongoing</p>	<p>Ongoing</p> <p>Summer 2</p> <p>Ongoing</p>

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		<p>care needs of some children. The risk assessment may identify other control measures that should be in place such as screens, physical barriers, hand sanitising, enhanced cleaning regime to reduce the risk of transmission. Parents should also be advised to follow the social distancing and hand washing/sanitisation guidance.</p> <ul style="list-style-type: none"> Advise parents there is a significant difference between a Face covering and a Face mask. Face covering is intended for use by the general public, consist of a layer of cotton cloth, can be easily made at home or purchased from the shops. They are not a Personal Protective Equipment (PPE) or a medical device, not regulated and as such do not carry a CE mark. A face covering safely covers the nose and mouth e.g. a scarf, bandana, religious garment or hand-made cloth covering can also be used as a face covering but these must securely fit round the side of the face. A Face mask on the other hand is part of the PPE and is intended to protect the wearer and generally consists of three protective layers. These are regulated, carry a CE mark and made according to specifications. They are generally used in clinical and some social care settings according to specific needs. Advise parents and young people their allocated drop off and collection times and the process for doing so, including protocols for minimising adult to adult contact (for example, which entrance to use) Make clear to parents that they cannot gather at entrance gates or doors, or enter the site (unless they have a pre-arranged appointment, which should be conducted safely) Those positive with Covid-19 or symptoms - phone or email notification to be urgently made to the school and affected persons to stay away from site until required isolation periods have passed. Parents to be advised to follow guidance below. COVID-19: guidance for households with possible coronavirus infection guidance 	<p>Send out letter to Parents via ParentMail with March updates and reminders of ongoing practises in school.</p> <p>Review ParentMail connections.</p>	<p>SLT</p> <p>Admin</p>	<p>02.03.21</p> <p>Ongoing</p>	<p>02.03.21</p> <p>Weekly</p>

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		<i>Please add any additional specific arrangements applicable to your school.</i>				
5. Shielded and clinically vulnerable Groups including those who are pregnant. SEND pupils	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <p>The latest guidance from Schools HR can be found here.</p> <ul style="list-style-type: none"> Shielding measures will continue until at least 31st March 2021. The current advice on shielding can be found here: guidance-on-shielding-and-protecting-extremely-vulnerable-persons Shielding paused from 1st April 2021 Retuning staff members required to have 1st dose of vaccine before returning to work. a small number of pupils will still be unable to attend in line with public health advice because they are self-isolating and have had symptoms or a positive test result themselves; or because they are a close contact of someone who has coronavirus (COVID-19) Clinically extremely vulnerable children and young people should not attend school or other educational settings, because the risk of exposure to the virus in the community is now very high. School or colleges are required to make appropriate arrangements for them to be able to continue your education at home. some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to school (usually at their next planned clinical appointment). You can find more advice from the Royal College of Paediatrics and Child Health at COVID-19 - 'shielding' guidance for children and young people. Please read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice. Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, we expect schools to be able to immediately offer them access to remote education. 	<p>If parents of pupils with significant risk factors are concerned, we recommend schools discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school. Schools should 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.).</p>			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
Black, Asian and Minority Ethnic (BAME) and clinically vulnerable groups	UK and international data suggest that people from Black, Asian and Minority Ethnic (BAME) backgrounds are disproportionately affected by COVID-19.	<ul style="list-style-type: none"> Where children are not able to attend school as parents are following clinical and/or public health advice, absence will not be penalised. It remains the case that wider government policy advises those who can work from home to do so. We recognise this will not be applicable to most school staff, but where a role may be conducive to home working, for example some administrative roles, school leaders should consider what is feasible and appropriate. Where schools apply the full measures in this guidance the risks to all staff will be mitigated significantly, including those who are extremely clinically vulnerable and clinically vulnerable. We expect this will allow most staff to return to the workplace, although we advise those in the most at risk categories to take particular care while community transmission rates continue to fall. Advice for those who are clinically vulnerable, including pregnant women, is available. Individuals who were considered to be clinically extremely vulnerable and received a letter advising them to shield are strongly advised to work from home because the risk of exposure to the virus in their area may currently be higher. If they cannot work from home, then they should not attend work. Advice for those who are extremely clinically vulnerable can be found in the guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19. Pupil local individual SEND care plans and risk assessments (where in place) reviewed regularly. To include the need for possible close contact and relevant PPE use. Where closer contact may be necessary (for example personal care) appropriate PPE to be worn. This would include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the individual is coughing, spitting. Management staff to follow manufactures instructions on how to use PPE correctly 	<p>School leaders should be flexible in how those members of staff are deployed to enable them to work remotely where possible or in roles in school where it is possible to maintain social distancing.</p> <p>People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.</p> <p>Review and update risks assessments routinely for vulnerable members of staff.</p>	SLT	08.03.21	

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		Individual Health Risk Assessment undertaken with BAME / Clinically Vulnerable staff members using 'appendix 1' of this document.				
6. Entry to school premises	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Traffic management plan revised to ensure pedestrian / vehicle separation is maintained. Particular consideration given where queuing areas are introduced Schools should consider well in advance future events, including parents evenings – how they will be managed in terms of COVID-19 arrangements  <ul style="list-style-type: none"> 2 metre demarcation on school entry approaches where possible Pictorial notices to maintain social distancing displayed Supervision of queues by nominated staff members Staggered start times, including free periods and break time Controlled entry to building Staff supervising entry to school to follow social distancing guidelines Staff maintaining distance from pupils and other staff as much as possible  <ul style="list-style-type: none"> Clean hands thoroughly more often than usual. Hand washing / sanitisation stations (ideally soap and water to minimise possible adverse dermatological effects) at point of entry to school. All people entering the school must sanitise hands prior to entry. (20 seconds minimum recommended for washing with soap and water) Staff trained on hygiene protocols to eliminate cross-infection risks. Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach 	<ul style="list-style-type: none"> Information / protocol on safe entry to be disseminated to parents / carers / contractors Staff training on protocols Advice / instruction on social distancing / hygiene and cleaning practices <p>Maintain handwashing posters & soap around school site</p>	SBM	Ongoing	Ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Age appropriate instruction provided to pupils on hand washing methods. <p>Secondary schools</p> <ul style="list-style-type: none"> It is recommended that face masks should be worn by staff when moving around the premises, outside of classrooms, such as in corridors and communal areas. Face masks do not need to be worn by staff when outdoors on the premises. Where pupils in year 7 (which would be children who were aged 11 on 31 August 2020) and above are educated, it is recommend that face coverings should be worn by pupils when moving around the premises, outside of classrooms, such as in corridors and communal areas. Face coverings do not need to be worn by pupils when outdoors on the premises. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons. <p>Primary schools</p> <ul style="list-style-type: none"> In primary schools, it is recommended that face masks should be worn by staff and face coverings should be worn by visitors in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). Children in primary school do not need to wear a face covering. <p>New ingress and egress procedures: Parents coming onto school site requested to wear face masks on arrival.</p> <ul style="list-style-type: none"> The School has a system in place for removing face coverings when pupils and staff who use them arrive at school and communicate it clearly to them. Pupils instructed not to touch the front of their face covering during use or when removing them. They must wash their hands immediately on arrival (as is the case for all pupils), dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they can take home with them, and then wash their hands again before heading to their classroom. 	<p>All staff advised to wear shield or mask when collecting dismissing children.</p> <p>Communicate to parents via ParentMail</p> <p>All staff requested to wear face mask/visor in all communal areas of the school site.</p>	<p>SLT</p> <p>SLT</p> <p>All staff</p>	<p>Ongoing</p> <p>Summer 2</p> <p>Ongoing</p>	<p>Ongoing</p> <p>Summer 2</p> <p>Ongoing</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>Guidance on safe working in education, childcare and children's social care provides more advice.</p> <p>To dispose of waste from people with symptoms of coronavirus, such as disposable cleaning cloths, tissues, and PPE:</p> <ul style="list-style-type: none"> • put it in a plastic rubbish bag and tie it when full • place the plastic bag in a second bin bag and tie it • put it in a suitable and secure place marked for storage for 72 hours • Waste to be stored safely and securely kept away from children. <p><i>Rainy Day/ siblings Plans</i> Year 4 & 6 siblings are able to wait in school hall in designated areas, maintaining distance between the bubbles.</p>				
7. Reception areas	<p>Staff, pupils, contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	 <ul style="list-style-type: none"> • Telephone appointments/emails to office where possible to minimise queues at reception • Consider if surgical masks are going to be used, together with other PPE in reception areas and offices by staff • Screens in place to separate staff and/or demarcation to maintain safe distancing • Notices to maintain social distancing displayed • Queuing to be minimised where reasonably practicable  <ul style="list-style-type: none"> • Sanitisation / hand washing protocols to be observed when handling deliveries. • Enhanced cleaning regime in place at reception and all school settings in line with COVID-19: cleaning of non-healthcare settings guidance • Hand washing poster displayed • NHS Catch it, Bin it, Kill it poster displayed 	<p>Queuing to be minimised where reasonably practicable Screen ordered and fixed into place.</p> <p>Sanitiser stations set up in school reception.</p> <p>Continuous replenishment of sanitizer stations to be built into staff routines.</p> <p>Handwashing posters printed & displayed.</p> <p>Automatic dispensers fitted</p>	HT & PL		May 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		 <ul style="list-style-type: none"> Contractors and delivery companies should have safe systems of work, risk assessment and Covid-19 secure arrangements Rescheduled contractor visits (unless emergency situation) to times when pupils are not present 	Reschedule contractor visits (unless emergency situation) to times when pupils are not present			
8. Corridors / staircases	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Social distancing guidelines to be observed and monitored by nominated staff members Reduced need for children to regularly leave the classroom where possible (containment/non mixing) Where corridor use is required, consider release of a classroom at a time and stagger to reduce traffic and avoid spread of infection. While passing briefly in the corridor or playground is low risk, schools should avoid creating busy corridors, entrances and exits. Schools should also consider staggered break times and lunch times (and time for cleaning surfaces in the dining hall between bubbles). Demarcation of 2 metre distance where possible and queuing is likely Pictorial notices to maintain social distancing displayed Catch it / Bin it / Kill lit notices displayed One-way systems introduced where reasonably practicable  <ul style="list-style-type: none"> Increased natural ventilation where possible Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach <p>On review of foot traffic at main entrances child are able to enter classrooms at the beginning of the day and after break and lunch through external doors – This is followed by use of sanitiser in the classroom.</p> <p>All staff members to wear face covering while in communal areas.</p>	<p>Reduce need for children to regularly leave the classroom where possible (containment/non mixing)</p> <p>Where corridor use is required, consider release of a classroom at a time and stagger to reduce traffic and avoid spread of infection.</p> <p>One way systems mapped and shared with staff.</p> <p>One way systems mapped and shared with pupils.</p> <p>Shared in staff briefing</p> <p>Share in staff briefing</p>	<p>SLT & CT</p> <p>SLT & CT</p> <p>HT</p> <p>SLT</p>	<p>Ongoing</p> <p>Sept 20</p> <p>Sept Wk 3</p> <p>Nov 9th</p>	<p>Ongoing</p> <p>Sept 20</p> <p>Sept 2020 Sept wk 3</p>

Commented [t1]:

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
9. Classrooms	Staff, pupils, contractors, Visitors (Risk - as set out in section 1)	 <p>Social distancing</p> <p>The school has fully considered and implemented systems which meet current guidelines for classrooms set out here, this also applies to wraparound provision and before and after school educational activities</p> <p>Secondary schools</p> <ul style="list-style-type: none"> It is recommended that face masks should be worn by staff when in classrooms (where social distancing cannot be maintained). Face masks do not need to be worn by staff when outdoors on the premises. Where pupils in year 7 (which would be children who were aged 11 on 31 August 2020) and above are educated, it is now recommend that face coverings should be worn by pupils, in classrooms, face coverings do not need to be worn by pupils when outdoors on the premises. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons. <p>This additional precautionary measure for a limited time during this period of high coronavirus (COVID-19) prevalence in the community. These measures will be in place until Easter. As with all measures, it will be kept under review.</p> <p>How contacts are reduced will depend on the school's circumstances and will (as much as possible) include:</p> <ul style="list-style-type: none"> grouping children together to form a bubble avoiding contact between bubbles arranging classrooms with forward facing desks staff maintaining distance from pupils and other staff as much as possible 	<p>Replenish PPE supplies</p> <p>Wherever possible keep the same teacher with the same pupil bubble</p> <p>Year group bubbles protocols to be established and shared with staff & pupils.</p>	SLT	Sept inset & 7 th Sept	Sept inset

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> • small adaptations to the classroom to support distancing have been made where possible. This includes seating pupils side by side and facing forwards, rather than face to face or side on • Social distancing guidelines to be applied and monitored by nominated staff members • The bubble should be kept apart from other bubbles where possible and older children should be encouraged to keep their distance within bubbles and not to touch staff and their peers where possible. • Schools with the capability to do it should take steps to limit interaction, sharing of rooms and social spaces between bubbles as much as possible. • When using larger bubbles the other measures from the system of controls become even more important, to minimise transmission risks and to minimise the numbers of pupils and staff who may need to self-isolate. It is recognised that younger children will not be able to maintain social distancing, and it is acceptable for them not to distance within their bubble. • Approaches of separating bubbles and maintaining distance are not 'all-or-nothing' options and will still bring benefits even if implemented partially. Some schools may keep children in their class bubbles for the majority of the classroom time, but also allow mixing into wider bubbles for specialist teaching, wraparound care and transport. Siblings may also be in different bubbles. Endeavouring to keep these bubbles at least partially separate and minimising contacts between children will still offer public health benefits as it reduces the network of possible direct transmission. • Teachers and other staff can operate across different classes and year bubbles in order to facilitate the delivery of the school timetable. This will be particularly important for secondary schools. Where staff need to move between classes and year bubbles, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. (Again, we recognise this is not likely to be possible with younger children and teachers in primary schools, who can still work across bubbles if that is needed, including on different days to enable a full educational offer, as long as they are following the guidance on 	<p>Movement between phonics groups (y3) to be tracked via timetables & group lists.</p> <p>Desks in rows facing forward.</p> <p>Computing room - timetable for additional cleaning between each lesson.</p> <p>PPA & cover time timetable shared with staff, and keeps a record of movement.</p>	<p>CT</p> <p>SLT</p> <p>AHT</p> <p>AHT</p>	<p>Ongoing</p> <p>Sept 20</p> <p>Sept 20</p> <p>Weekly</p> <p>WB 19th Oct</p>	<p>Ongoing</p> <p>Sept 20</p> <p>Sept 20</p> <p>Weekly</p> <p>Ongoing</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>social distancing, hand washing, cleaning, Infection Prevention and Control (IPC) and considering within their risk assessment)</p> <ul style="list-style-type: none"> • PPA Teachers and Cover Supervisors are requested to wear PPE (Shield) when teaching as they are exposed to more children across bubbles. • Children to remain in allocated classroom team 'bubbles' where possible • In order to provide an effective service to safeguard children, if a mega-bubble (e.g. year group) is required within a school setting and is going to be created, this decision must be based on the overall risk assessment and considering individual risk assessments of pupils. Considering the guidance: Covid-19-SEND-risk-assessment-guidance. If bubbles are then required within the mega-bubble, special precautions and safety measures will be required to reduce the risk of cross bubble infection, considering the following guidance in you site specific arrangements within each relevant section of this risk assessment: Guidance-for-full-opening-special-schools-and-other-specialist-settings • Pictorial notices to maintain social distancing displayed • In order to minimise social distancing and hygiene risk through conducting visits with pupils out of school and to provide a full educational experience, schools through their risk assessment can develop COVID-19 hygiene and social distancing programmes that will allow them to bring in specialist subject teachers to deliver bespoke education to pupils. • All staff working in close contact to pupils has been instructed to wear face shield. • One way systems in place for each classroom entry/exits  <ul style="list-style-type: none"> • The school should aim to achieve a sensible balance between thermal comfort and natural ventilation in classrooms and other occupied spaces. The minimum temperature maintained in classrooms should not be below 16°C 	<p>Limiting the use of cover supervisor / PPA teachers to two year groups.</p> <p>Reminders for cover staff</p> <p>Reminders for cover staff</p>	<p>All staff</p> <p>All staff</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Ongoing</p> <p>Ongoing</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Further measures to achieve thermal comfort and ventilation for pupils and staff is set out here within 'Prevention' (sub-section section 8) actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools Increased natural ventilation / avoid rooms with no natural ventilation where possible. mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so) To balance the need for increased ventilation while maintaining a comfortable temperature, consider: <ul style="list-style-type: none"> opening high level windows in colder weather in preference to low level to reduce draughts increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is unused) providing flexibility to allow additional, suitable indoor clothing for more information see school uniform rearranging furniture where possible to avoid direct draughts <p>Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.</p> <ul style="list-style-type: none"> Hand washing poster displayed 	<p>When using portable fans all windows internal & external doors must be open at all times</p>	CT	Ongoing	Ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Classroom based resources, such as books and games, can be used and shared within the bubble; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles and sanitiser to be available Soft play / furnishing and items with intricate parts removed (early years settings) Increased cleaning frequencies of hard surfaces / emptying of bins Minimise sharing / touching of items Adequate tissues are available to clear up spills and to catch sneezes in line with Catch it / Bin it / Kill it advice Items to be sanitised before sharing (including PCs) / re-use by another person Teachers make sure they wash their hands and surfaces, before and after handling pupils' books. Teachers have been provided with gloves should they wish to use them when handling items in school. 	<p>Timetable breaks for full time cleaner to adhere too.</p> <p>Purchase additional bins with lids/pedal bins for use in classrooms and other areas not used in July</p> <p>Share joint advice from PHE & Dr Usman on Handling of resources in school with all staff</p>	<p>SLT</p> <p>Admin</p> <p>SLT</p>	<p>Sept 20</p> <p>Sept 20</p> <p>Mar 21</p>	<p>Sept 20</p> <p>Sept 20</p> <p>Mar 21</p>
10. Lunch times	<p>Staff, pupils, contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	 <ul style="list-style-type: none"> Staggered lunch times Social distancing guidelines to be applied Children to sit on one side of the tables only facing the same direction – Additional tables added to allow for more children Children to remain in allocated 'bubbles' as appropriate School dinners consumed in hall in year group bubbles, packed lunches in the classrooms. Supervised by middays. Adequate supervision ratios to enforce social distancing guidelines Utilise outdoor spaces where practicable 	<p>Timetable of lunches to be shared with staff & children.</p> <p>Zones created for the bubbles.</p> <p>Middays allocated roles for supervision of new normal.</p>	<p>SLT</p> <p>SIO & Midday Supervisor</p>	<p>Sept & Mar 21</p> <p>Sept 2020 & Mar 21</p>	<p>Sept 2020 & Mar 21</p> <p>Sept 2020 & Mar 21</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> One-way systems introduced where reasonably practicable Consider if packed lunches are brought in by pupils or if parents bring in packed lunches for their child later in the day Position of furniture in hall modified to allow for better control of traffic.  <ul style="list-style-type: none"> Hand washing / sanitisation prior to food consumption – children to be supervised Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach Minimise sharing of items Items to be washed / sanitised before sharing / re-use by another person Cutlery placed in trays/given to pupils by member of staff wearing gloves. Salad bar manned by adult.  <ul style="list-style-type: none"> School kitchens can continue to operate, but must comply with the guidance for food businesses on coronavirus (COVID-19) Sufficient time for staff lunch / welfare breaks factored into daily staff schedules 				
11. Hall assemblies	Staff, pupils, Contractors, Visitors (Risk - as set out in section 1)	 <p>If the school lets out halls and facilities for third parties to use in the evening or on weekends, this must be risk assessed in terms of social distancing, hygiene - including enhanced cleaning regimes to determine if the hall can be used by third parties in line with COVID-19 arrangements. If this cannot be achieved, your risk assessment may determine that you can no longer hire out halls and facilities.</p> 		SLT	Weekly	Ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Bubbles should be kept apart, meaning that schools should avoid large gatherings such as assemblies or collective worship with more than one bubble. Year group rewards assemblies to take place with distancing between each class group. During these assemblies the children should not cheer, chant or sing <p>General hall use</p> <ul style="list-style-type: none"> Social distancing guidelines to be applied for all general activity Adequate supervision ratios Pictorial notices to maintain social distancing displayed One-way systems introduced where reasonably practicable  <ul style="list-style-type: none"> Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach 	<p>Assemblies done via teams/zoom or pre-recorded</p> <p>Assembly Timetable shared</p> <p>Refresher on one systems map for staff.</p> <p>Share one systems with pupils.</p>	<p>RA</p> <p>SLT</p> <p>CT</p>	<p>Summer 2</p> <p>Sept</p> <p>Sept</p>	<p>Summer 2</p> <p>Sept 2020</p> <p>Sept 2020</p>
12. Toilets	<p>Staff, pupils, Contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	 <ul style="list-style-type: none"> Different bubbles do not need to be allocated their own toilet blocks, but toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet Controlled entry determined locally - Additional adult on duty to monitor this. Pictorial notices to maintain social distancing displayed Children to remain in team 'bubbles' Staff WC use managed locally (including class times) Staff toilets continue to allow one person at a time in order to maintain social distancing.  <ul style="list-style-type: none"> Hand washing protocol increased to before and after use of toilet facilities (20 seconds minimum recommended) Hand washing poster displayed in all WCs Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach 	<p>Additional signage place I toilets not used in July.</p> <p>Signage to allocate year group sink/toilets in blocks for year 5 & 6.</p> <p>Signage in year 4 toilets placed to allow for year 3 children to use them during playtimes.</p> <p>Timetable for spot clean in toilets shared with cleaning staff.</p>	<p>SLT</p> <p>SLT</p> <p>SLT</p> <p>SLT</p>	<p>Sept</p> <p>Sept</p> <p>Sept</p> <p>Sept</p>	<p>Sept 2020</p> <p>Sept 2020</p> <p>Sept 2020</p> <p>Sept 2020</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
14. Libraries	Staff, pupils, contractors, visitors, (Risk - as set out in section 1)	 <ul style="list-style-type: none"> • Site specific consideration for the safe use of the library prior to wider opening of the school must be given to allow for social distancing requirements and hygiene protocols which may include: <ul style="list-style-type: none"> • Children to remain in allocated classroom team 'bubbles' where possible • limited number on entry • One-way system • PC spacing  <ul style="list-style-type: none"> • Hand sanitisation prior to entry and on egress • Books used to be left to one side for cleaning and re-filing by staff member following hygiene protocols • PCs sanitised after each use • Increased natural ventilation • Soft play / furnishing and items with intricate parts removed (early years settings) • Increased cleaning frequencies of hard surfaces / emptying of bins • Minimise sharing / touching of items • Adequate tissues are available to clear up spills and to catch sneezes in line with Catch it / Bin it / Kill it advice • Items to be sanitised before sharing / re-use by another person • Labelled boxes for returned books. These will then be left for 72 hours before being returned to the library. • This will be applicable for book corners in classrooms. 	<p>One way system mapped for the use of the library, shared with staff and pupils.</p> <p>Sanitiser station created at entrance to library.</p> <p>Additional bins bought for areas not in use in July</p>	<p>SLT</p> <p>SLT & CT</p> <p>SLT</p>	<p>Sept</p> <p>Sept</p> <p>Sept</p>	<p>Sept 2020</p> <p>Sept 2020</p> <p>Sept 2020</p>
15. Lifts	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	<p>NO LIFTS AT TVJ</p>  <ul style="list-style-type: none"> • Procedure in place for control of access/egress and use of lifts • Demarcation to allow social distancing on egress • Single person travel (unless accompanying SEND pupils) 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Prevent / reduce use of outdoor play equipment wherever possible as the virus lasts longer on metal surfaces Ensure the outdoor play equipment is more frequently cleaned than normal Soft play items removed (early years settings) Sanitisation upon re-entry to classroom Water fountains taken out of use – individual beakers to be used Increased Hygiene protocols introduced including enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach <p>+</p> <ul style="list-style-type: none"> Sufficient time for staff lunch / welfare breaks factored into daily staff schedules 	<p>TVJ outdoor play ground out of use.</p> <p>TVJ outdoor playground timetabled for use per bubble.</p> <p>Audit of PPE available for staff.</p>	<p>SLT</p> <p>HT</p>	<p>Summer</p> <p>WB 19th Oct & Mar 21</p>	<p>Summer</p> <p>WB 19th Oct & Mar 21</p>
18. Music lessons	<p>Staff, pupils, contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	<p>+</p> <p>There may be an additional risk of infection in environments where you or others are singing, chanting, playing wind or brass instruments or shouting. This applies even if individuals are at a distance.</p> <ul style="list-style-type: none"> The school has considered how to reduce the risk, particularly when pupils are playing instruments or singing in small bubbles such as in music lessons by, for example, social distancing and playing outside wherever possible, positioning pupils back-to-back or side-to-side, avoiding sharing of instruments, and ensuring good ventilation. <p>Playing indoors</p> <ul style="list-style-type: none"> If indoors, use a room with as much space as possible, for example, larger rooms; rooms with high ceilings are expected to enable dilution of aerosol transmission. If playing indoors, limiting the numbers to account for ventilation of the space and the ability to social distance. It is important to ensure good ventilation. The Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak and CIBSE coronavirus (COVID-19) advice provides more information. 	<p>Timetable music lessons allowing time for the instruments to be cleaned.</p> <p>Year 4 Fife lessons to take place in the hall socially distanced. With all windows open.</p>		<p>Mar 21</p>	<p>Ongoing</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>Singing, wind and brass playing</p> <ul style="list-style-type: none"> Singing, wind and brass playing should not take place in larger groups such as choirs and ensembles, or assemblies unless significant space, natural airflow (at least 10l/s/person for all present, including audiences) and strict social distancing and mitigation as described below can be maintained.  <ul style="list-style-type: none"> Resources that are shared between classes or bubbles, such as sports, art and science equipment are cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles. Christmas shows postponed until later in the year if advice changes to allow group performances. Charanga lessons – Taught without the singing sections, no use of wind instruments – Music lead to plan for this. <p>22nd April - Music Mark Advice on Singing I have attached the latest Music Mark guidance and the supplement to the previous Music Unlocked document reflecting any additional changes to teaching since April 12th. An encouraging addition is: In school you can: Sing and play any and all combinations of instruments in class, including woodwind and brass. The guidance prioritises social distancing and ventilation for higher aerosol activities.</p> <ul style="list-style-type: none"> 		Music lead	Sept 2020	Sept 2020
19. Physical activity in school	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Schools have the flexibility to decide how physical education, sport and physical activity will be provided whilst following the measures in their system of controls. Pupils should be kept in consistent bubbles, sports equipment thoroughly cleaned 	PE curriculum map to plan to social distancing and the use of the hall for indoor slots.	PE Lead	Sept 2020	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>between each use by different individual bubbles, and contact sports avoided.</p> <ul style="list-style-type: none"> Outdoor sports should be prioritised where possible, and large indoor spaces used where it is not, maximising natural ventilation flows (through opening windows and doors or using air conditioning systems wherever possible), distancing between pupils and paying scrupulous attention to cleaning and hygiene. This is particularly important in a sports setting because of the way in which people breathe during exercise. External facilities can also be used in line with government guidance for the use of, and travel to and from, those facilities. Schools should refer to the following advice: guidance on the phased return of sport and recreation and guidance from Sport England for grassroots sport advice from organisations such as the Association for Physical Education and the Youth Sport Trust Schools where required will work with external coaches, clubs and organisations for curricular and extra-curricular activities where they are satisfied that this is safe to do so. Schools will also consider carefully how such arrangements can operate within their wider protective measures. Activities where possible will be used, such as active miles, making break times and lessons active and encouraging active travel help enable pupils to be physically active while encouraging physical distancing. Consideration has been given to changing facilities and toilets in these facilities in relation to changing and use of the toilets.  <ul style="list-style-type: none"> Resources that are shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles. Toilets will not be used for changing facilities. Swimming lessons cancelled – Due to the potential of additional adults crossing multiple year groups. 	<p>Risk assessment and protocols shared with external coaches.</p> <p>Daily mile timetabled for all classes.</p> <p>Communicate to parents & staff</p>	<p>SLT</p> <p>PE lead</p> <p>HT</p>	<p>Sept 2020 & Mar 21</p> <p>Sept 2020 & Mar 21</p> <p>WB 19th Oct</p>	<p>Sept 2020 & Mar 21</p> <p>Sept 2020 & Mar 21</p> <p>WB 19th Oct</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
20. Home time / egress from school premises	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> • 2 metre demarcation on school egress where possible • it is recommended that face masks are worn by staff and face coverings worn by pupils • Pictorial notices to maintain social distancing displayed • Supervision of queues by nominated staff members • Staggered egress times • Controlled egress from building • Staff supervising egress to follow social distancing guidelines  <ul style="list-style-type: none"> • Normal personal hygiene and washing of clothes • New protocols for the dismissal of children in place. • Staff requested to wear PPE when dismissing children. 	Communicate staggered egress times with Parents via ParentMail.	SLT Admin team. &		
21. Fire drills / Emergency situations	Staff, pupils, Contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> • Adequate numbers of trained staff to safely evacuate all personnel on the school premises • Demarcation of safe distancing in place at assembly points in line with social distancing guidelines (2 meters) where reasonably practicable • Fire drill to be undertaken within the first week of re-occupation  <ul style="list-style-type: none"> • Upon discovery of an actual fire, immediate evacuation of the building in a safe and controlled manner will be essential. Evacuation is the priority, in this circumstance social distancing may need to be relaxed to enable quicker evacuation. 	Distancing between year group bubble assembly points mapped. Map shared with Staff & Pupils. Update fire evacuation policy in line with new guidelines for Sept.	SLT	Sept 2020	Sept 2020
22. First Aid	Staff, pupils, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> • Adequate numbers of trained staff to administer First Aid • Check First aid boxes content and facilities available 	Additional first aid training for all members of staff.	HT	Sept 3 rd & 4 th	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		 <ul style="list-style-type: none"> Where closer contact may be necessary, wear appropriate PPE to protect First Aider and casualty. This would include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the casualty is coughing, spitting, or vomiting First Aid PPE provided to include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the casualty is coughing, spitting, or vomiting The best way to protect is through rigorous cleaning, personal hygiene and regular hand hygiene. Where possible, all contact with members of the public should be carried out while maintaining social distancing measures If not possible, the principles for the Hierarchy of Risk should be applied, using measures such as physical barriers and alternative working practices Where other safe working systems alone may not be feasible or insufficient, as a final measure, use of PPE based on risk assessment For resuscitation - only deliver CPR by chest compressions and use a defibrillator (if available) DON'T do rescue breaths. HSE first-aid guidance can be found here. Please read COVID-19: guidance for first responders Contact the health and safety team if it is suspected that a staff member at work has been diagnosed as having COVID-19 attributed to an occupational exposure (not societal) to coronavirus (needs to be evidence based) Management and staff must read and follow manufactures instructions on how to use PPE correctly. Guidance on PPE and the correct fitting of face masks can be found here. 	<p>Refresher of the correct use of PPE.</p> <p>Small first aid boxes with essentials including PPE in each classroom and staff room.</p> <p>Print out HSE guidance to be placed in each first aid box and first aid room.</p>	<p>HT</p> <p>SIO</p> <p>SIO</p>	<p>Sept inset</p> <p>Sept 2020</p> <p>Sept 2020</p>	<p>Sept 2020</p> <p>Sept 2020</p> <p>Sept 2020</p>
23. Transport Arrangements	<p>Staff, pupils, Contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	 <ul style="list-style-type: none"> Protocol in place in line with 3. Section 2: School operations 	<p>TVJ does not use any transport on a regular basis.</p>			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>The approach to dedicated transport should align as far as possible with a system of controls, it is important to consider:</p> <ul style="list-style-type: none"> • How pupils are grouped together on transport, where possible this should reflect the bubbles that are adopted within school • Use of hand sanitiser upon boarding and/or disembarking • Additional cleaning of vehicles • Organised queuing and boarding where possible • Distancing within vehicles wherever possible, accepting this may not be possible for special needs transport and local site arrangements will be determined within this risk assessment • The use of face coverings for children over the age of 11, where appropriate, for example, if they are likely to come into very close contact with people outside of their bubble or who they do not normally meet  <ul style="list-style-type: none"> • Discussion between school, local authority and transport provider to confirm suitable safe protocols are in place e.g. social distancing / cleaning / hygiene and supervision arrangements. • The transportation of special needs children risk assessment reviewed in line with Covid-19 requirements • If using your own school minibus, follow the government guidance for social distancing and cleaning/hygiene and supervision arrangements. 	<p>When TVJ resumes off site trips, following government guidance & complete RA.</p>			
24. School Trips	<p>Staff, pupils, contractors, visitors</p> <p>(Risk - as set out in section 1)</p>	 <ul style="list-style-type: none"> • It is not advised to take pupils on any educational visits at this time. domestic (UK) overnight and overseas educational visits at this stage see coronavirus: travel guidance for educational settings. • School to observe and follow current guidance on educational visits. These trips should include any trips for pupils with SEND connected with their preparation for adulthood (for example, workplace visits, travel training etc.). This should be done in line with protective measures, such as keeping children within their 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>consistent bubble, and the COVID-secure measures in place at the destination. Schools should also make use of outdoor spaces in the local area to support delivery of the curriculum.</p> <ul style="list-style-type: none"> As normal, schools should undertake full and thorough risk assessments in relation to all educational visits to ensure they can be done safely. As part of this risk assessment, schools will need to consider what control measures need to be used and ensure they are aware of wider advice on visiting indoor and outdoor venues. Schools should consult the health and safety guidance on educational visits when considering visits. In order to minimise social distancing and hygiene risk through conducting visits with pupils out of school and to provide a full educational experience, schools through their risk assessment can develop COVID-19 hygiene and social distancing programmes that will allow them to bring in specialist subject teachers to deliver bespoke education to pupils. Workshops in schools planned rather than going on trips. 	Copy of risk assessment & protocols will be shared with any visitors.	Admin	Ongoing	
25. Reoccupation of areas which have not been in use during lockdown.	<p>Staff, pupils, contractors, visitors.</p> <p>Due to some or all parts of the school premises not being used for a period of time, inspection and testing of building services and safety devices to ensure they are in full working order is required.</p>	<p>Visual inspection of whole school premises to identify and remedy health and safety hazards (undertaken with the schools Trade Union Health and Safety Representative)</p> <ul style="list-style-type: none"> Building services maintained in accordance with the LBBD 'Duty Holder Support Pack' including: Maintenance checks of plant and equipment undertaken – including school kitchen equipment. Fire alarms and systems checked and operational including: <ul style="list-style-type: none"> Fire alarm panel status green Fire call points operational Emergency lighting operational 	<ul style="list-style-type: none"> In the event of site manager sickness – relief caretaker employed. Areas not in use during school closures prepared with social 	<p>SBM</p> <p>Site Manager</p>	<p>Ongoing</p> <p>Mar 21</p>	<p>Mar21</p>

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> ○ Firefighting measures e.g. fire extinguishers, blankets all present and maintained • Gas systems maintained • Water flushing of little used outlets undertaken to minimise risk of legionella and checks/maintenance undertaken/up to date on hot and cold-water systems (and pools) in accordance with Legionella water risk assessment. Every tap (hot and cold) should be run for minimum of 2 minutes in all areas of the school premises which have not been used during lockdown period • Electrical equipment and systems maintained • Electrical gate systems maintained • Lifts and lifting equipment/hoists maintained • Ventilation / air conditioning / extraction systems maintained if using a central ventilation system that removes and circulates airs to different rooms, it is recommended that you turn off re-circulation and use a fresh air supply • Asbestos management arrangements in place • Boiler room plant inspected / maintained • Play and PE equipment to still receive scheduled inspection (even though taken out of use) • Fume cupboards maintenance up to date (Secondary schools only) • Identify and remedy possible vermin infestations 	distancing measures in place.			
26. Air conditioning systems	(Risk - as set out in section 1)	<div style="border: 1px solid black; padding: 2px; width: 15px; height: 15px; display: flex; align-items: center; justify-content: center; margin-bottom: 5px;">+</div> <ul style="list-style-type: none"> • Ventilation / air conditioning / extraction systems maintained. • If using a central ventilation system that removes and circulates airs to different rooms, it is recommended that you turn off re-circulation and use a fresh air supply • mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> • natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air • natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so) • To balance the need for increased ventilation while maintaining a comfortable temperature, consider: <ul style="list-style-type: none"> • opening high level windows in colder weather in preference to low level to reduce draughts • increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is unused) • providing flexibility to allow additional, suitable indoor clothing (for more information see school uniform) • rearranging furniture where possible to avoid direct draughts <p>Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.</p> <ul style="list-style-type: none"> • HSE guidance on use of air conditioning systems followed https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation and CIBSE coronavirus (COVID-19) advice provides more information. <p>Please add any additional specific arrangements applicable to your building.</p>				
27. Fire	<p>Staff, pupils, contractors, visitors</p> <p>Smoke inhalation, exposure to heat</p>	<p></p> <ul style="list-style-type: none"> • Fire risk assessment and Emergency Evacuation Plans revised to take into account areas which may not be in use and changes of use to the building. • Personal Emergency Evacuation Plans (PEEPS) in place and revised where necessary • Ensure emergency evacuation routes out of the building are not compromised including fire doors and final exit doors. 	Update School map, and assembly point markers for the classrooms & Teachers			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Fire Assembly points arranged and monitored to ensure designated bubbles are kept separate Schedule fire drill for children to practise new evacuation plans adhering to social distancing measures. 				
28. Behaviour of pupils / staff	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Review of the school's pupil behaviour policy to ensure that they cover COVID-19 risk related incidents (to include individual risk assessment of children with known challenging behaviour) Non-compliance (designated space for de-escalation/cooling-off period with social distancing measures in place). Year bubbles. Use of library to cater for mixed bubbles in designated zones Designated spaces in place for pupils displaying ACEs/Trauma/anxiety, SEND and non-compliance Provision in place for the school to be able to sanction pupils who wilfully refuse to adhere to arrangements of social distancing and deliberately cough or spit at pupils or staff, putting them at risk. Policy reviewed in line with current Government guidance considering staff also. Guidance is available here. Please see processes outlined in 'Local principles on school exclusions and pupil behaviour' document School to monitor staff in relation to keeping to strict social distancing guidelines. The staff code of conduct applies in these times of Covid-19 and are expected to maintain social distancing and hygiene protocols at all times Training in place to reinforce expectations of staff behaviours, including adult to adult interactions. <p><i>Please add any additional specific arrangements applicable to your school.</i></p>	<p>Changes to behaviour management policy communicated with Parents via Parent Mail</p> <p>Share reviewed behaviour policy with staff and children.</p> <p>Assembly on expectations for full reopening of school.</p>	SLT HT HT	Sept 2020 Mar 21	Sept 2020
29. Behaviour of parents / visitors / contractors	Staff, pupils, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Review of the school's violence and aggression policy to ensure that it covers COVID-19 risk related incidents. 	Review UB policy in line with new guidance.	SLT	Sept	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
(Violence and aggression)		<ul style="list-style-type: none"> Provision in place that the school will not tolerate and will take the firmest possible action possible should any person wilfully refuses to adhere to arrangements of social distancing or deliberately expose school occupants to risk Consider cooling off designated areas for parents/visitors For observed incidents outside the school regarding Covid-19 related antisocial behaviour contact 101 unless emergency dial 999 Schools police officer regularly patrolling areas before and after school 	<p>Sign post policy to staff.</p> <p>Put on website.</p>			
30. COSHH Cleaning / Sanitisation products	Pupils Due to required increased cleaning/sanitising of hard surfaces and items in classrooms, there is a need to ensure no residual traces of cleaning products / or access to the cleaning / sanitising product by children	 <ul style="list-style-type: none"> COSHH risk assessment updated to include all newly introduced cleaning products Training provided to all staff members required to use cleaning products (in consultation with the schools cleaning provider) Manufacturers COSHH Safety Data Sheet provided to users of chemical outlining safe use, storage, emergency arrangements and PPE to be used. Strict instruction to staff / cleaning provider to keep any cleaning / sanitisation products stored / secure and out of reach of children at all times Work with in house or external cleaning provider to ensure safe systems and protocols for use and storage are in place. Increased Hygiene protocols introduced including enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach <p>Walk-through disinfecting systems and cleaning premises using fog, mist or UV treatment</p> <p>The HSE and public health bodies have agreed joint <u>advice for dutyholders</u> considering using walk-through spraying or misting disinfecting systems. Walk-through disinfecting systems are not recommended under any circumstances, as this could be harmful and</p>		SBM	Sept	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<p>does not reduce the spread of COVID-19, this view is supported by the World Health Organisation.</p> <p>Fog, mist, vapour or UV (ultraviolet) treatments may be suitable options to help control the spread of COVID-19, as long as this has been considered as part of a COVID-19 Risk Assessment and users are competent, properly trained and follow the correct procedures. Any service believing they may need to use such a system, must discuss this with the health and safety team prior to purchase and use.</p>				
31. Dealing with / clearing up with Body Fluids	Staff, pupils, visitors (Risk - as set out in section 1)	 <ul style="list-style-type: none"> Body Fluids protocol updated to include COVID-19 risks to include: <ul style="list-style-type: none"> Where clearing up of body fluids is required, the staff member must full appropriate PPE. This will include disposable gloves, disposable apron and fluid resistant surgical facemask and eye protection or face shield PPE and waste disposal protocols to be followed (double bag waste) Handwashing protocols to be followed Protocol in place to respond to emergency cleaning requirements and increased cleaning requests . 	Refresher on the correct use of PPE.	HT	Sept inset & Mar 21	Sept 2020 & Mar 21
32. Equalities and Mental Wellbeing	Staff, pupils Mental wellbeing could be affected by C-19 pandemic	 <ul style="list-style-type: none"> Schools mental wellbeing and support mechanisms for staff and pupils reviewed Governing boards and school leaders should have regard to staff (including the headteacher) work-life balance and wellbeing. Schools will ensure they have explained to all staff the measures they are proposing putting in place and involve all staff in that process. All employers have a duty of care to their employees, and this extends to their mental health. Schools have mechanisms to support staff wellbeing. The Department for Education is providing additional support for both pupil and staff wellbeing in the current situation. Information about the extra mental health support for pupils and teachers is available. 	Signpost staff to wellbeing policy.	SLT	Sept Inset	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> Schools have equalities policies to protect their employees, and others, from harm and continue to assess health and safety risks and consider how to meet equalities duties in the usual way. Member of staff working from home to be checked in on weekly whilst isolating. Selected members of staff have completed bereavement training provided by the borough. Counselling available through school. Helpline shared with staff SIO, LM & AHT – Training to become mental health first aider 	SENDCo & SBM to complete MH first aid training	SENDCo & SBM	Apr 21	
33. Staff taking leave	Staff, pupils, parents	 <ul style="list-style-type: none"> School staff have been working extremely hard throughout the coronavirus (COVID-19) outbreak and will be working hard to prepare for all pupils to return from the start from 8th March 2021. Many staff will want to take a holiday over the summer period, which may involve travelling abroad. Current restrictions do not allow travel abroad for holidays or leisure purposes but check here for latest advice: https://www.gov.uk/guidance/travel-advice-novel-coronavirus The government has set a requirement for people returning from some countries to quarantine on their return. The latest guidance on quarantine can be accessed at coronavirus (COVID-19): how to self-isolate when you travel to the UK. There is a risk that where staff travel abroad, their return 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. Where it is not possible to avoid a member of staff having to quarantine during term time, school management should consider if it is possible to temporarily amend working arrangements to enable them to work from home. 	<p>Letter sent out to staff in relation to quarantine period during the summer holidays. Which states schools position on holidays booked after the 8th June.</p> <p>SBM to follow up any members of staff who have not read document yet.</p>	HT SBM	July 2020 Ongoing	July 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
Pupils taking leave		<ul style="list-style-type: none"> Schools may want to mirror and adapt the above guidance in relation to pupils. Individual Schools needs to take into account their Pupil Absence Management Policy and possibly adapt/amend and make the appropriate decision for their setting 				
34. Business Continuity	Staff, pupils, Closure of premises	 <ul style="list-style-type: none"> Schools Business Continuity Plan reviewed to include COVID-19 related risks <p><i>Please add any additional specific arrangements applicable to your school.</i></p>				
35. Travel Plan	Staff, pupils (Risk - as set out in section 1)	 <ul style="list-style-type: none"> School Travel Plan to be developed in line with Coronavirus (COVID-19): safer travel guidance for passengers Parents should be encouraged where possible to walk or cycle their children to school rather than using any form of transport. This will encourage healthy lifestyle; help reduce pollution and avoid overcrowding at car parks and help maintain social distancing. Car parking and permit availability to be reviewed Staff should not be car sharing or transporting pupils in their own or school vehicles. <p><i>Please add any additional specific arrangements applicable to your school.</i></p>				
36. Supply teachers, temporary or	Staff, temporary or peripatetic staff	<ul style="list-style-type: none"> Where applicable, you can continue to use supply teachers and staff. It is recommended to use the Crown Commercial Service's agency supply deal when hiring agency workers. This offers a list 	Share risk assessment with SMART teachers for supply staff.	SLT	Sept 20 & Mar 21	

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
peripatetic staff, recruitment	(Risk - as set out in section 1)	<p>of preferred suppliers, who must provide transparent charging rates. You can get support by emailing supplyteachers@crownccommercial.gov.uk with your school's requirements and contact details.</p> <ul style="list-style-type: none"> Supply staff and other temporary or peripatetic staff can move between schools. Such staff and visitors must follow the school's arrangements for managing and minimising risk based on the system of controls. They should also have access to information on the safety arrangements and be provided with this as soon as possible after the booking. You can continue recruiting members of staff. Schools should consider a flexible approach to interviews, with alternative options to face-to-face interviews offered where possible, with guidance available here. 	<p>Supply staff requested to complete LF testing prior to coming into school.</p> <p>Supply staff requested to wear face covering while on site.</p>			
37. Transmission of Covid-19	Staff, pupils, contractors, visitors	<p>While it is understood children may not be social distanced in school it is expected that all staff, contractors and visitors will be following social distancing measures as per government guidance: https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing</p> <p>All staff, pupils, visitors and contractors will be following the government's guidance on hand washing.</p> <p>Additionally, we are putting the following measures in place:</p> <ul style="list-style-type: none"> Staff and pupils to are encouraged to wear clean clothing every day. To be made to clear to staff during training in Sept that although all protective measures have been put in place, it is ultimately their responsibility to ensure social distancing, particularly from other adults, as scientifically this seems to be where there is an increased possibility of Covid-19 rather than between children and adults. After school clubs will be year group based to minimise risk of transmission. 	To be discussed during staff training and disseminated to parents by letter.	SLT		

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> • Air conditioning to be switched off to minimise risk of transmission. • Radios and chargers to be kept in classroom and sanitised after each use. • If children are bringing their own packed lunch, this must be in a small bag/box. Children cannot bring any personal items to school for example stationary. Footballs, play equipment, books from home. • Children will be able to bring in PE kit (on day of PE lesson), water bottle, packed lunch, school reading books only – Use of catch up funding to buy CPG catch up books – Children will bring them in – Teachers will not handle them. <p><u>Begging 16th October</u> Due to the number of confirmed cases in other schools across bubbles additional precautions must be put into place to better protect the school and local community – Guidance given to Headteacher by CEO of PL. Thames view Junior School cannot function effectively without some movement between bubbles. There for the following measures will be put into place.</p> <ul style="list-style-type: none"> • PPA & Cover teachers to wear PPE (Shield) as they come into contact with more than one bubble. • PPA teachers & cover supervisor movement across bubble reduced to just two year groups. • Visors worn by middays at lunch & staff during break duty. • Adults visiting & entering classes (eg SLT, SENCO, SIO or admin) will be required to wear PPE. • All meetings more than 15 minutes in length, should not take place face to face (within bubbles also) • Even if in a room adjacent, meetings for more than 15 minutes should be either by phone or through TEAMS. • Car sharing - Even within bubbles face masks must be worn. 	Shared with staff in Briefing	HT	Sept 2020	Sept 2020

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
		<ul style="list-style-type: none"> • It is highly discouraged that staff members in different year group bubbles do not travel together in the same car. This could potentially put multiple children and adults in multiple year groups at risk. <p>9th Nov</p> <ul style="list-style-type: none"> • All staff members to wear face covering while in communal areas. 				

It is important you discuss your assessment and proposed action with employees and their representatives. A risk assessment is only effective if you and your employees act on it. You must follow through with any actions required and review it on a regular basis. You should review your risk assessment if you think it may no longer be valid e.g. following an accident/incident, or if there are significant changes to the hazards in your workplace, such as new equipment or work activities. You should consider, at a minimum, an annual review of your assessment. Risk assessment guidance is available for further information and advice on carrying out a risk assessment.

[Actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools#A](#)

Disclaimer. Template correct at the time of development, although any links referred to internal/external should be checked regularly as official advice is likely to be updated as the situation continues to develop.

**Schools - Covid-19 Individual Health Risk Assessment Form, Guidance and
FAQS**

This guidance applies to School employees who are required to physically be in work for some or all the time. We are aware that many Schools have already undertaken risk assessments and good arrangements are in place. If individual risk assessments have been done, there is no requirement to repeat this but they will need to be updated to include specific Covid-19 risks. The process has been introduced to make sure that no one has been missed, and in particular to ensure that in advance of ongoing research by Public Health England on the risk factors for BAME employees that individual health risk assessments have been undertaken and are in place.

The scheduling of Schools returning to a physical location is being currently overseen by the council's Commissioning Director - Education. Individual Health Risk assessments for staff who are currently home working will not be undertaken at this stage but will of course be required once a decision has been made for them to return to a physical work location. The assessment will need to be undertaken prior to the return to a physical workplace.

Protecting front-line staff

In response to the Covid-19 pandemic we have:

- Undertaken risk assessments for Schools, considering the need for Covid-19 secure workplaces.
- Applied Government and Public Health England (PHE) guidance for PPE in our own visual guides for key workers which help staff work safely; ensure staff feel supported in their work and protect local services.
- Advised employees in specific groups that are potentially more vulnerable to practice robust social distancing measures.
- Closely followed all relevant Government and PHE guidance about social distancing, self-isolation and shield and protect arrangements.
- Ensured that key workers are aware of testing arrangements and supported for a safe return to work.

We have put in place creative solutions to enable social distancing at work, by measures such as:

- changing the layout of Schools
- adjusting shift patterns, where possible
- staggering commute times

At risk groups

Coronavirus (Covid-19) can make anyone seriously ill. But for some people, the risk is higher. There are 2 levels of higher risk groups - individuals that are **high risk** ([clinically extremely vulnerable](https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk-from-coronavirus/whos-at-higher-risk-from-coronavirus/)) and those that are **moderate risk** (clinically vulnerable). See more on this at <https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk-from-coronavirus/whos-at-higher-risk-from-coronavirus/>.

It is important that the Head Teacher/Senior Leadership Team explores this with individual employees to help them take more personal responsibility for managing risks.

Employees at high risk (clinically extremely vulnerable)

Staff who are in a clinically extremely vulnerable group [COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable](#) should have received a letter from the NHS, and they should be shielding. GP fit notes are not valid confirmation of this status. This group of employees should not be physically in work under any circumstances and must robustly follow shielding measures to keep themselves safe.

The following arrangements apply:

- If the employee can work from home, they will continue to do so. In some cases, work can be reorganised to facilitate this.
- In other situations, some key workers will be unable to work from home; they are expected to stay at home on full pay. A letter setting out these arrangements should be provided, and they will be kept under review pending Government and PHE guidance. Alternative work will also be explored, subject to reviewing the skills of the employee.

Employees at moderate risk (clinically vulnerable)

If an employee is at moderate risk from coronavirus, they can go out to work (if they cannot work from home, we advise that an individual risk assessment is undertaken remotely) It is very important that they follow the general advice on social distancing, including staying at least 2 metres away from anyone they do not live with, where possible. Unlike people at high risk, they will not get a letter from the NHS. Individual Health Risk Assessments are vital for this group of employees to ensure that all the right levels of controls can be put in place.

The health and individual characteristics include the following:

- have a lung condition that is not severe (such as asthma, COPD, emphysema or bronchitis)
- have heart disease (such as heart failure)
- have diabetes
- have chronic kidney disease
- have liver disease (such as hepatitis)
- have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy)
- have a condition that means they have a high risk of getting infections
- are taking medicine that can affect the immune system (such as low doses of steroids)
- are very obese (a BMI of 40 or above)

Covid-19 and Pregnancy

NHS guidance states that there is no evidence that pregnant women are more likely to get seriously ill from coronavirus, but they have been included in the list of people at moderate risk (clinically vulnerable) as a precaution. This is because pregnant women can sometimes be more at risk from viruses like flu. It is not clear if this happens with coronavirus. But because it is a new virus, it is safer to include pregnant women in the moderate-risk group. Risk Assessments are already undertaken on this group of staff, so please continue to undertake individual assessments.

Other Risk Factors: BAME staff

Emerging UK and international data suggest that people from Black, Asian and Minority Ethnic (BAME) backgrounds are also being disproportionately affected by Covid-19 and Public Health England have recently published a report on the disparities in the risk and outcomes. Until there is clarity about the risks, we advise that BAME staff may be additionally vulnerable to Covid-19.

On their own these factors may not require restriction from any particular activity but with BAME staff in particular considering if there any underlying health conditions present as well this would reinforce the need to apply stringent control measures which include social distancing and/or the use of Personal Protective Equipment (PPE). The Health Risk Assessment has been designed to help identify the control measures that need to be agreed and put in place.

Other Risk Factors: Age and Gender

Similarly, those in an older age group and male gender also seem to confer increased risk and these facts should be taken in to account in the health risk assessment.

Advice on undertaking a Health Risk Assessment

When you are reviewing work activities it is important to consider individual risks and aim to reduce them if possible, even if the risk is low.

In undertaking a health risk assessment, the standard hierarchy of risk management should be followed.

When managing hazards and risks, the Hierarchy of Controls must be applied (working top down), as set out below

Elimination

The hazard, task or activity is physically removed or abandoned.

Substitution

Replace a material or process with a less hazardous one

Engineering controls

Isolate employees from the hazard

Administrative controls

Identify and implement procedures to maximise safe working.

Personal Protective Equipment (PPE)

Only to be considered if measures above would be ineffective to control risks or a case by case basis if this reassures an individual to attend work.

It is not possible to avoid all risk and the aim of the health risk assessment is to avoid unacceptably high-risk activities and to bring down risk in other areas as far as reasonably practicable. Most people in the moderate risk categories will be able to continue working but it is still important to consider how you could reduce their risk.

The Head Teacher or Senior Leadership Team should undertake a health risk assessment with the employee and discuss the following:

- The issues, potential risk factors and how mitigation can be enabled in the way in which the work is undertaken. This includes safe systems of work, social distancing, hygiene measures and the use of appropriate personal protective equipment (PPE)
- Any temporary or alternative working arrangements that can be put in place to enable the key elements of the job role to be done.

The health risk assessment form provides a consistent framework to help you to undertake the process. If duties cannot be adjusted or the standard hierarchy of Covid-19 risk management cannot be followed (as outlined above), the School must submit the health risk assessment to Occupational Health (or the School's Occupational Provider) using the fast track referral Covid-19 Specific management referral form to support/provide additional recommendations.

FAQs

1. Do I need to undertake a health risk assessment for staff now using the attached form and guidance?

Yes - for all current School staff who fall into the categories identified above. This should be undertaken remotely, prior to returning to work, please share with the individual, as their input is required and this document should be kept demonstrate the action/s that have been taken to reduce the risks.

2. Are there certain staff groups that the health risk assessment should be undertaken for?

All School staff should be consulted about having a health risk assessment, if they are in a vulnerable group. We are aware from Public Health England advice and guidance that some groups are at greater risk these include employees with some health conditions, age, pregnant employees and BAME employees.

3. How do I approach this with my employees?

We are asking Schools to undertake health risk assessments for all vulnerable employees. In relation to employees from BAME communities, the research and statistics from Public Health England have shown that BAME communities are at a higher risk of contracting the Covid-19 virus with a disproportionate number of deaths, so we want to provide assurance that there is a formal opportunity to assess all the risks to protect our employees. This has been designed to look for solutions and to provide reassurance.

Government and Public Health England guidance has set out the groups at moderate risk and it is important that we provide a structured and consistent framework. It is recognised that some employees may have multiple health risk factors.

4. What if I already have an individual risk assessment for the member of staff, do I need to do another one?

No - but you must review and update the current risk assessment with the employee to ensure that Covid-19 concerns are discussed and addressed as to any potential risks.

5. If staff are shielding and are at home 100%, (either working or not working), I assume that they do not need a health risk assessment at this time as they should continue to be at home until further advice is received?

Yes - these staff do not require a health risk assessment at this time, but this may be required, depending on government guidance, when the return to School is imminent.

You will use the form if you receive a new notification that the employee has received an NHS shielding letter. We are aware that the list of people required to shield has been reviewed by GPs and others, and new people contacted to say that they have now been included, and some who have been advised that they are no longer required to do so.

Under current government guidance clinically extremely vulnerable staff must not come to work and should follow robust shielding arrangements.

6. If a team member is in a vulnerable group and I think that with minor adjustments they can now do all their work at home, do I have to carry out a health risk assessment?

Yes, the health risk assessment will help you to identify what you can put in place. The minor adjustment could be for example swapping home visits to virtual visits, where this is possible to do so.

7. Do Managers send the health risk assessment to Occupational Health regardless of the outcome?

No – if you and the employee have agreed a range of control measures and they can safely work (with hazards removed) you will not need to ask Occupational Health to review further.

However, please ask Occupational Health for advice if you are unsure, or you and the employee cannot agree on what needs to be in place. If you need your risk assessment to be reviewed, we have a fast track Covid-19 referral arrangement in place.

If you do not think that the person can work at all, as you cannot control the hazards and their job cannot be adjusted, refer to Occupational Health for review. If you need your risk assessment to be reviewed, we have a fast track Covid-19 referral arrangement in place.

If at any time you need advice, please call or email the Occupational Health Service, if your School buys into the service.

8. What if the member of staff refuses to co-operate with the health risk assessment?

The process should be undertaken with sensitivity and be supportive. It should not be intrusive, and you should always provide reassurance of confidentiality .

Try to find out the reasons why and what their concerns are and resolve to address them. If, however they do not wish to discuss this with you, find out if they may be happier discussing directly with Occupational Health; if so, then refer them using the Covid-19 fast track OH referral. If they still do not wish to engage please discuss further with your HR Adviser and make a note on the health risk assessment and send through the HR Portal for their Personal File.

9. What should I do with the completed health risk assessments?

This should be sent through the HR Portal to be placed on the employee's Personal File, if you buy into our HR Service, if not keep a copy at the School.

10. Who is responsible for the health risk assessment?

As with all risk assessments, the Head Teacher or Senior Leadership Team are responsible and accountable, even where you have asked advice from HR or Occupational Health, etc.

11. What kind of controls and mitigation have others put in place?

These are individual health risk assessments and will depend on individual circumstances and job roles. The following have been suggested by others:

- Stagger start and finish times and introduce rota/shift practices to help practice social distancing
- Visits requiring face to face contact use virtual meetings, if possible
- Where an onsite visit is absolutely critical call in advance and use a check list including asking about the opportunity to wash hands, and to find out if anyone unwell
- Access to Work could be involved for equipment and other resources
- Workplace Options Employee Assistance Programme can provide guidance, support and counselling
- Car parking and cycle facilities could be made available
- Make sure that the employee is aware of the relevant PPE required for their role has been issued with the guidance and has ongoing access to PPE.

12. Do I keep the health risk assessment under review?

Yes, it is suggested that this is undertaken monthly as part of the one-to-one process or if any circumstances change.

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Health Risk Assessment: Exposure to Covid-19, impact on current health condition

General Information			
Employee Name		Job Title	
Line Manager		Job Title	
Location / Area:		Working Hours:	
Date of Assessment:		Review Date:	
Individuals underlying health condition category / other factors:	Please tick appropriate box: <input checked="" type="checkbox"/>	Current post involves:	Please tick appropriate box: <input checked="" type="checkbox"/>
	<p><u>Clinically Vulnerable</u> <u>Extremely Vulnerable</u></p> <p>(Shielding very high-risk group)</p> <p>Note - front line employees should not be in work in any circumstances but may be able to undertake full or some work at home.</p>		<p>Directly caring for Covid-19 pupils / service users (tested as positive) and undertakes Aerosol generating procedures (AGPs)</p>
	<p>Clinically Vulnerable – Clinically vulnerable people are those who are:</p> <ul style="list-style-type: none"> • aged 70 or over (regardless of medical conditions) • under 70 with an underlying health condition listed below (that is, anyone instructed to get a flu jab each year on medical grounds): • chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis • chronic heart disease, such as heart failure • chronic kidney disease • chronic liver disease, such as hepatitis • chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS) or cerebral palsy • diabetes • a weakened immune system as the result of certain conditions or medicines they are taking (such as steroid tablets) • being seriously overweight (a body mass index (BMI) of 40 or above) • pregnant 		<p>Directly caring for Covid-19 pupils / service users (tested as positive) – not undertaking AGPs</p>
	BAME Employee		Directly caring for service users not tested / unknown Covid-19 status but within 2 meters of patient – within any setting

			Proving a service which involves levels of face to face interactions with service users / members of the public	
			Proving a service to colleagues (e.g. training)	

What are you already doing?

Aspects	Current Position	Additional action to reduce risk
Can face to face interactions be limited and move to virtual working?		
If they cannot, will they be able to work at 2m social distancing		
What arrangements are in place / will be put into place to ensure regular contact / wellbeing?		
Can work times be adjusted to reduce the use of public transport, especially at peak times.		
Can work times within the team be staggered to reduce group sizes?		
Can the layout of the workplace be adjusted to allow for 2-metre social distancing?		
Is Personal Protective Equipment readily available (including hand sanitiser for mobile working) where a need is identified?		
Other considerations:		

Assessment

<i>Please tick appropriate box:</i>	✓	Monitoring / further action:
Actions agreed as detailed above reduce the risks to the employee		Local manager to review and monitor.
Actions agreed as detailed above do not fully reduce the risks to the colleague / some concerns remain.		Refer employee to Occupational Health for further advice and support

Additional notes

Please add any additional notes as appropriate

Employee signature		Date signed	
Print Name			
Manager's signature		Date signed	
Print Name			
Occupational Health Review			

Schools Covid-19 Risk Matrix

(Modified Safety Assessment and Decision (SAAD) Score)

This risk assessment and matrix is based on the evidence available to date reviewed by a group of medical practitioners and provides an indication and guidance to carry out an individual risk assessment. This document will be reviewed and updated as and when new evidence emerges. This document is provided to supplement the individual risk assessment, previously circulated, but does not substitute the risk assessment or the conversation that you are required to hold with individual member of staff.

This risk matrix will give you an indication of the risk and therefore, if a member of staff scores higher, it means that the risk assessment and conversation may need to be more in depth with additional professional advice sought from Human Resources and Occupational Health colleagues.

There are some limitations that may be considered when interpreting the findings. This document may help schools to supplement risk assessment of their staff, particularly of high risk and vulnerable groups to ensure staff safety. Please do remember this is to be applied to each individual on a case by case basis. There could be mental health issues for the staff that may need to be considered while carrying out the risk assessment. Head Teachers should refer staff to the Employee Assistance Programme, where your school buys into the service. Alternatively these resources are also available <https://www.gov.uk/government/news/extra-mental-health-support-for-pupils-and-teachers> & [Wellbeing guide for staff working in schools and trusts](#). Please ensure that the true feelings and concerns of the staff member can be captured.

Instructions for completing the risk assessment

- Arrange meeting with the staff member to jointly go through the score card
- Record the findings by encircling/ticking all relevant boxes
- Staff member having any one of the four risks in the 'high' risk category will automatically place themselves in the 'high' risk category (red boxes) irrespective of other variables and despite the total number scored.
- Discuss mental health and well-being concerns with staff member
- Complete each row and then add all rows to provide a total risk figure
- Record any decisions made to mitigate/reduce risk
- Record a review date for future review (provide staff member a copy of the score card)
- This score card is not for workers that fulfil the government criteria for 'Shielding' – these workers should follow national guidance and stay at home

Risk Rating

Mild Risk Score: 1-7	Moderate Risk Score: 8-11	High Risk Score: 12 or above OR if the individual falls into one of the High-Risk categories i.e. 5
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	1	2	3	4	5 High Risk	Row score
Age	40-49	50-59	60-69		70 +	
Ethnicity	White Chinese Mixed origin *Other	Indian	Bangladeshi Pakistani Middle East	Black		
	*BAME Other: Any staff that do not fall into one of the categories above, score according to other ethnicities above.					
Gender	Female	Male				

Obesity (BMI) kg/m2	Over 23 (exclude white/ Chinese/ mixed)		Over 30 (white/ Chinese/ mixed)	Over 27.5 (exclude white/ Chinese/ mixed)	Over 40 (All groups)	
	<p>Body Mass Index (or BMI) is calculated as weight (in kilograms) divided by the square of your height (in metres) or BMI = Kg/M2. For measuring BMI a weighing scale to measure weight and a scale to measure the height will be required. If height is in centimetres, convert into metres by dividing by 100.</p>					
Pregnancy		Under 28 weeks			Over 28 weeks	
Medical Conditions- (as below)	One condition			Two conditions	Three or more conditions	
Medical Conditions	<p>Each of the conditions below would be considered for the score card. Some of the conditions will be the same as the shielding category but will be 'severe' in the shielding category and 'mild' or 'moderate' for this score card. Medical conditions in each category should be assessed individually.</p> <ul style="list-style-type: none"> • Respiratory problems (Asthma (taking daily inhaled steroid)/COPD/Bronchiectasis) • Heart Problems (Heart Failure, Angina, History of Heart Attack) • Chronic Kidney Disease (stage 3 and above) • Chronic Liver Disease including Hepatitis 					

- | | |
|--|---|
| | <ul style="list-style-type: none">• Chronic Neurological Conditions (Parkinson's, Motor Neurone Disease, History of Stroke (CVA), Multiple Sclerosis, Cerebral Palsy)• Diabetes (Type 1 or 2)• Reduced Immune Response - AIDS/HIV, regular oral steroids• Hypertension (on one or more anti-hypertensive medication)• Ongoing inflammatory bowel conditions (Crohn's, Ulcerative Colitis) |
|--|---|

Appendix:

Evidence:

Age

An analysis of survival among people with confirmed COVID-19 by sex, age group, ethnicity, deprivation and region, shows that, compared with people under 40, the probability of death was about three times higher among those aged 40 to 49, nine times higher among those aged 50 to 59, twenty-seven times higher among those aged 60 to 69, fifty times higher among those aged 70 to 79 and seventy times higher among those aged 80 and over. These are the largest disparities by far found in this analysis

Ethnicity

An analysis of survival among confirmed COVID-19 cases shows that, after accounting for the effect of sex, age, deprivation and region, people of Bangladeshi ethnicity had around twice the risk of death when compared to people of White British ethnicity. People of Chinese, Indian, Pakistani, Other Asian, Caribbean, and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British. ONS analysis showed that, when taking age into account, Black males were 4.2 times more likely to die from a COVID-19-related death than White males (16). The risk was also increased for people of Bangladeshi and Pakistani, Indian and Mixed ethnic groups.

The relationship between ethnicity and health is complex and likely to be the result of a combination of factors. Firstly, people of BAME communities are likely to be at increased risk of acquiring the infection. This is because BAME people are more likely to live in urban areas (18), in overcrowded households (19), in deprived areas (20), and have jobs that expose them to higher risks (21). People of BAME groups are also more likely than people of White British ethnicity to be born abroad (22), which means they may face additional barriers in accessing services that are created by, for example, cultural and language differences.

Secondly, people of BAME communities are also likely to be at an increased risk of poorer outcomes once they acquire the infection. For example, some co-morbidities which increase the risk of poorer outcomes from COVID-19 are more common among certain ethnic groups. People of Bangladeshi and Pakistani background have higher rates of cardiovascular disease than people from White British ethnicity (23), and people of Black Caribbean and Black African ethnicity have higher rates of hypertension compared with other ethnic groups (24). Data from the National Diabetes Audit suggests that type II diabetes prevalence is higher in people from BAME communities (25).

Gender:

The analysis showed that working age males diagnosed with COVID-19 were twice as likely to die than females. For older adults (65 and over) the disparity remains significant but is much lower, with males in this age group having approximately 50% higher risk of death when compared to females

Obesity:

A study using data from over 400,000 patients aged 40 to 69 from UK Biobank linked to COVID-19 test data from PHE found that higher BMI was associated with a positive COVID-19 diagnosis (43). Compared with non-overweight people (BMI < 25 kg/m²), the odds ratios were 1.26 (confidence interval of 1.01-1.56) for those who were overweight, 1.37 (1.06-1.76) for those in obese class I and 2.04 (1.50-2.77) for those in obese classes II and III combined.

Although many score cards available refer to obesity above a BMI of 30, data available is clear for the BAME community this risk increases with a BMI of 23, with further significant risk with a BMI of 27.5 and above.

Pregnancy:

Existing guidance identifies that pregnant women over 28 weeks should be regarded as at increased risk and recommended to stay at home. For pregnant women with underlying health conditions at any stage of pregnancy a more precautionary approach is required, and ethnicity should be included in the consideration and discussion between healthcare staff and managers. Where pregnancy is under 28 weeks gestation working in a public/pupil facing environment should be on the basis that the risk assessment supports this.

Medical conditions:

Emerging evidence suggests that certain conditions: hypertension, cardiovascular disease, diabetes, and chronic kidney disease are especially important risk factors, and these risk factors are increased in those of BAME population. Obesity has now also emerged as an independent risk factor for COVID-19 hospitalisation in the UK setting.



Actions

This is a guide, please do not apply this prescriptively, as individual risks and circumstances will vary.

Occupational Health's referrals in respect of Covid-19, should generally be used in the following instances:

- when an employee is at high-risk and additional advice is required around what can be accommodated. Shielding employees do not need to be referred as national guidance exists for this group.
- when a risk assessment has been completed but is inconclusive.

Occupational Health will be able to advise where an employee is very anxious about returning to work and can provide support and signposting to other services.

Mild	Continue working as normal but following controls set out within the risk assessment and safety precautions (i.e. cleaning down all work/school areas before and after use, ensure where possible social distancing both during work and during breaks)
Moderate	Follow controls within risk assessment and safety precautions. Adjust working hours, work in a separate room, consider other adjustments, where possible. The focus is to support staff to attend work where possible.
High	Follow controls within risk assessment and safety precautions. No direct contacts. Lone working or working in separate office with minimal movement within the building. Working from home, where possible

Examples of staff and scoring	
Male	2 points
Chinese	1 point
Age 56	2 points
BMI 28	1 point

No medical conditions	0 point
Score:	6 points Mild risk category
Male	2 points
Black	4 points
Age 42	1 point
Diabetic (IDDM)	1 point
Score:	8 points Moderate risk category
Female	1 point
Egyptian	3 points
Age 64	3 points
BMI 36	4 points
Angina and Diabetic	4 points
Score:	15 points High risk category

Disclaimer

The SAAD Score is provided as a guidance and should be used as such. The line manager/Head Teacher/SLT/Governor should use the score card as an aid-memoire. Where necessary if a clear option is not available, then with mutual agreement a solution should be sought. If there is a disagreement in the role and function following an assessment, it is up to the employer to seek either HR (Human Resource) or OH (Occupational Health) advice.

The co-authors take no responsibility for consequences as a result of problems generated due to the use of the SAAD Score system. With the emerging evidence, the scoring system will be revised and it is up to the score system user to ensure they have access to the latest version available. At School level the co-authors would encourage the staff member to self-assess their position based on individual circumstances and experience. They may score themselves outside the allocated score in the system, which will then be for discussion with their line manager/Head

Teacher/SLT/Governor. The co-authors would encourage supportive discussions between manager/Head Teacher/SLT/Governor and staff members in a way that acknowledges the particular pressures faced by BAME staff during Covid-19.

This matrix is based on the trends identified by a group of medical practitioners (via Public Health), it is not totally definitive as there is insufficient conclusive evidence; further studies are expected.