

MODEL RISK ASSESSMENT FORM

Workplace	Chiddingly Primary School	Likelihood (L)	X	Severity (S)
Department	Whole School	Almost Impossible	1	Insignificant (minor injury, no time off)
Risk Assessor	Kayleigh Vile	Unlikely	2	Minor (injury and up to 7 days off)
Room/Area	Whole school	Possible	3	Moderate (injury causing more than 7 days off)
Activity/Task	Managing Covid-19 in a school setting	Likely	4	Major (death or serious injury)
Date	26.1.22	Almost Certain	5	Catastrophic (multiple deaths)
Benefit of activity	Allowing opening of school during Covid 19	Low = 1-8	Medium = 9-14	High = 15-25

This document was updated on 26th January 2022. Latest information is in brown

It is being kept under review as updated guidance is published by the Government and reviews of the impact of COVID-19 by Public Health England.

Schools should share the results of their risk assessment with their workforce (including local union representatives). If possible, they should consider publishing it on their website to provide transparency of approach to parents, carers and pupils (HSE would expect all employers with over 50 staff to do so).

The [DfE latest documents and guidance webpage](#) is being updated regularly

What are the significant, foreseeable, hazards? (the dangers that can cause harm)		Who is at Risk?	Control measures	Risk Rating			What additional control measures can be put in place to reduce the risk further?	Revised Risk Rating		
				L	S	R		L	S	R
1.	<p>Potential transmission to clinically vulnerable staff and pupils</p> <p>Guidance is available in the Actions for schools during the Coronavirus Outbreak</p>	All members of school community	<p>Ensure that there is an understanding that:</p> <p>The UK Clinical Review Panel has recommended that no children and young people under the age of 18 should be considered CEV and under-18s should be removed from the Shielded Patient List. The chief executive of the UK Health Security Agency and head of NHS Test and Trace has written to parents of these children to inform them.</p> <p>Children and young people previously considered CEV should attend school and should follow the same COVID-19 guidance as the rest of the population. However, if advised to isolate or reduce their social contact by their specialist, due to the nature of their medical condition or treatment, rather than because of the pandemic, they should continue to follow the advice of their specialist.</p> <p>Unless they are CEV, encourage parents/carers and staff to follow the <u>guidance that applies to everyone</u></p> <p>Clinically extremely vulnerable (CEV) people are advised, as a minimum, to follow the same guidance as everyone else. It is important that everyone adheres to this guidance, but CEV people may wish to think particularly carefully about the additional</p>	2	4	8				

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			<p>precautions they can continue to take. If staff were previously identified as being CEV, they are advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Whilst individual risk assessments are not required, employers are expected to discuss any concerns that people previously considered CEV may have.</p> <p>Work in partnership with local BAME and/or faith communities to reinforce individual and household risk reduction strategies relevant to the school community PHE review of the impact of Covid-19 on BAME groups</p> <p>The school will continue to assess the health and safety risks to staff and meet their equality duties as per their local procedures.</p> <p>Governors and leaders should pay regard to the wellbeing of all staff including the headteacher.</p> <p>Schools should ensure they have explained to all staff the measures they are proposing putting in place and involve all staff in that process.</p> <p>All pregnant workers must undertake a workplace risk assessment with their employer and/or their</p>							

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			<p>occupational health team if they have one.</p> <p>Vaccination is the best way to protect against the known risks of COVID-19 in pregnancy for both women and babies.</p> <p>Pregnant workers should be supported by their employer with appropriate risk mitigations in line with recommendations provided by the workplace risk assessment. Employers should make sure the controls identified by a risk assessment for example adequate ventilation, good hygiene and cleaning, are applied strictly.</p> <p>Pregnant workers who continue to come into work should also consider taking lateral flow tests regularly.</p> <p>While members of these groups are no longer required to shield, the school should appreciate arrangements being made for them to reduce their face-to-face contact during periods of high viral prevalence.</p> <p>Employers should be able to explain the measures they have in place to keep staff safe at work. The Health and Safety Executive (HSE) has published guidance on protecting vulnerable workers, including advice for employers and employees on how to talk about reducing risks in the workplace. Employers should discuss concerns with staff.</p>							

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			<p>1 CEV staff member with individual risk assessment in place.</p> <p>Health and safety advice for schools</p>							
2.	Risk of ongoing contamination from pupils and staff	All members of the school community	<p>The government is no longer advising people to work from home if they can.</p> <p>It is no longer necessary to keep pupils in consistent groups or 'bubbles'. Assemblies can resume and there is no longer a need to make alternative arrangements to avoid mixing at lunch.</p> <p>Music and PE lessons can continue as normal. However, schools should ensure that control measures are in place and well communicated:</p> <p>Hand hygiene: Frequent and thorough hand cleaning is regular practice. The school ensures that pupils clean their hands regularly with soap and water or hand sanitiser.</p> <p>Ensure sufficient and proportionate handwashing supplies and cleaning materials are available. Where a sink is not nearby, provide hand sanitiser in classrooms and other learning environments.</p>	2	4	8				

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			<p>Respiratory hygiene: The ‘catch it, bin it, kill it’ approach continues to be adhered to in school.</p> <p>Cleaning: Areas and equipment are cleaned regularly with a particular focus on frequently touched surfaces</p> <p>The school follows the government guidance on cleaning of non-healthcare settings.</p> <p>Ventilation: The school will be well ventilated with windows and doors opened to create air flow.</p> <p>CO2 monitors will be provided to all state-funded education settings from September, so staff can quickly identify where ventilation needs to be improved. Further information will be issued as monitors are rolled out.</p> <p>Any poorly ventilated spaces will be identified in the risk assessment and steps taken to improve fresh air flow in these areas, giving particular consideration to when holding events where visitors such as parents are on site.</p> <p>Adjust any mechanical ventilation systems to increase the ventilation rate where possible and check to confirm that normal operation meets current guidance and that only fresh outside air is circulated</p>							

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			<p>In the very few cases where an area of poor ventilation (sustained CO2 readings above 1500ppm) has been identified and this cannot be resolved through opening windows and doors or minor repair works, it may be appropriate to consider the use of an air cleaning unit as an additional mitigation whilst further remedial work is undertaken to improve ventilation</p> <p>The Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic and CIBSE COVID-19 HYPERLINK "https://www.cibse.org/coronavirus-covid-19"advice provides more information.</p> <p>The government has said that 7,000 air cleaning units will be provided to early years settings, schools and colleges, in an attempt to improve ventilation in teaching spaces. Schools will have to prove they are eligible for the units. All state schools can apply for these units if they meet the criteria. The eligibility criteria and how to apply can be found here.</p> <p>Contingency plans are in place outlining how the school would operate if there were an outbreak within school or local area.</p>							

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			<p>The school will call the dedicated advice service who will escalate the issue to the local health protection team, where necessary and advise if any additional action is required, such as implementing elements of your contingency plan.</p> <p>Communicate to parents that pupils should not come into school if they have symptoms or have had a positive test result.</p> <p>Anyone who develops COVID-19 symptoms, will be sent home and told to follow public health advice. If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. A member of staff will supervise the pupil awaiting collection. This will be the Rainbow Room. There are external windows that can be opened. The room will be cleaned once the pupil has been collected.</p> <p>Appropriate PPE should also be used if close contact is necessary.</p> <p>Further information on this can be found in the <u>use of PPE in</u> <u>HYPERLINK</u> <u>"https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-</u></p>							

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			<p><u>care"education, childcare and children's social care settings</u> guidance.</p> <p>Testing</p> <p>Close contacts in schools are now identified by NHS Test and Trace and education settings are not expected to undertake contact tracing.</p> <p>From Tuesday 14 December, a new national approach to daily testing for contacts of COVID-19 was introduced (including until the end of this term). All adults who are fully vaccinated and children aged 5 to 18 years and 6 months, identified as a contact of someone with COVID-19 – whether Omicron or not – should take a lateral flow device (LFD) test every day for 7 days instead of self-isolating. Daily testing by close contacts will help to slow the spread of COVID-19, and, unless they have a positive test result or develop symptoms at any time, they should continue to attend school as normal.</p> <p>Once notified by NHS Test and Trace as a close contact, all eligible staff, pupils and students should take an LFD each day for 7 days and report the results through the <u>Online Reporting System</u> and to their setting. If they test negative, they can continue to attend their education setting. Outside of the education setting, they should continue to follow the advice set out in the <u>Sunday 12 December press</u></p>				<p>The government recommends that schools do not go on any international visits before the start of the autumn term. From the start of the new school term, you can go on international visits that have previously been deferred or postponed and organise new international visits for the future.</p> <p>Bubbles in wraparound provision are not required but the measures around cleaning, hand washing, and ventilation should be in place.</p>			

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			<p><u>release</u>. This approach should also be adopted over the winter break and on return in January.</p> <p>From 11 January, people who receive positive lateral flow device (LFD) test results for coronavirus (COVID-19) will be required to self-isolate immediately and won't be required to take a confirmatory PCR test. Whilst levels of COVID-19 are high, the vast majority of people with positive LFD results can be confident that they have COVID-19. Anyone who develops 1 of the 3 main COVID-19 symptoms should stay at home and self-isolate and take a PCR test. They must self-isolate if they get a positive test result, even if they have had a recent negative lateral flow test – these rules have not changed.</p> <p>Under this new approach, anyone who receives a positive LFD test result should <u>report their result on GOV.UK</u> and must self-isolate immediately but will not need to take a follow-up PCR test.</p> <p>After reporting a positive LFD test result, they will be contacted by NHS Test and Trace so that their contacts can be traced and must continue to self-isolate.</p> <p>In the case of someone receiving a positive PCR test result they must self-isolate. If the PCR test is negative, they no longer need to self-isolate but</p>							

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			<p>should continue to carry out the remainder of the daily tests, and only need to isolate if it is positive.</p> <p>Children under 5 years who are identified as close contacts are exempt from self-isolation and do not need to take part in daily testing of close contacts. They are advised to take a PCR test if the positive case is in their household.</p> <p>From Monday 17 January, people who are self-isolating with COVID-19 will have the option to reduce their isolation period after 5 full days if they test negative with a lateral flow device (LFD) test on both day 5 and day 6 and they do not have a temperature. For example, if they test negative on the morning of day 5 and the morning of day 6, they can return to their education or childcare setting immediately on day 6.</p> <p>The first test must be taken no earlier than day 5 of the self-isolation period, and the second must be taken the following day. All test results should be <u>reported to NHS Test and Trace</u>.</p> <p>If the result of either of their tests is positive, they should continue to self-isolate until they get negative results from two LFD tests on consecutive days or until they have completed 10 full days of self-isolation, whichever is earliest.</p>							

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			<p>Anyone who is unable to take LFD tests or anyone who continues to have a temperature will need to complete the full 10 day period of self-isolation.</p> <p>Further actions for educational settings may be advised by a local Incident Management Team (IMT) investigating a suspected or confirmed case of COVID-19.</p> <p>Communicate to parents that staff and pupils with a positive LFD test result should self-isolate in line with the <u>stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection</u>. They will also need to <u>get a free PCR test to check if they have COVID-19</u>.</p> <p>Whilst awaiting the PCR result, the individual should continue to self-isolate. Additional information on <u>PCR test kits for schools and further education providers</u> is available.</p> <p>The school will maintain its capacity to deliver high-quality remote education for the next academic year, for pupils who are of compulsory school age and pupils who are below compulsory school age but who would usually be taught in a class with compulsory school aged children (most commonly in a reception class). Including for pupils who are abroad and facing challenges to return due to</p>							

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			<p>COVID-19 travel restrictions, for the period they are abroad.</p> <p>The remote education provided should be equivalent in length to the core teaching pupils would receive in school. Schools should work collaboratively with families and put in place reasonable adjustments so that pupils with special educational needs and disabilities (SEND) can successfully access remote education. Full expectations for remote education, support and resources can be found on this link: https://get-help-with-remote-education.education.gov.uk/</p> <p>The school will consider combining class groups to ensure pupils remain in school during periods of high teacher absence due to Covid. The Department for Education has also told schools that, where there is a need for remote education, live streaming lessons is the "preferred method".</p> <p>Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. The school will access useful links and sources of support on <u>promoting and supporting mental health and wellbeing in schools</u>.</p>							

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			<p>Educational visits can resume with risk assessments in place which include systems of controls at the destination. Check the provider has assessed the risk and implemented appropriate control measures. Any attendance restrictions should be reflected in the visits risk assessment and setting leaders should consider carefully if the educational visit is still appropriate and safe. Only students who are attending the setting should go on an educational visit. Education settings should consult the health and safety guidance on educational visits when considering visits.</p> <p>You MUST ensure there is adequate financial protection in place in the event of a COVID-19 cancellation. You MUST consult with your insurers to find out if there are any COVID-19 exceptions.</p> <p>The government recommends that schools consider whether to go ahead with planned international educational visits at this time, recognising the risk of disruption to education resulting from the need to isolate and test on arrival back into the UK. Schools should refer to the Foreign, Commonwealth and Development Office travel advice and the guidance on international travel before booking and travelling. Schools should continue to offer wraparound provision, such as breakfast and after-school clubs,</p>							

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			<p>for those children eligible to attend school to help support the children of critical workers.</p> <p>Face Coverings</p> <p>From 20 January, face coverings are no longer advised for pupils, staff and visitors in classrooms. From 27 January, face coverings are no longer advised for pupils, staff and visitors in communal areas. From 27 January, staff and pupils should follow wider advice on face coverings outside of school, including on transport to and from school.</p> <p>A director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility.</p> <p>In these circumstances, transparent face coverings can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited.</p> <p>Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They should only be used after</p>							

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			<p>carrying out a risk assessment for the specific situation and should always be cleaned appropriately</p> <p>Schools should have a small contingency supply of face masks available. Children of primary school age and early years children should not be advised to wear face coverings. These are stored in the school office and Rainbow Room.</p> <p>Leaders MUST ensure that school has enough tissues and bins available to support pupils and staff to follow the 'catch it, kill it, bin it' approach. Reinforce routines of using a tissue to cough or sneeze and bins for tissue waste.</p> <p>Ensure all the usual building checks are undertaken to make the school safe.</p> <p>Health and Safety, and safeguarding policies and practices kept up to date in line with current DfE guidance.</p> <p>Keep risk assessments under regular review in line with government guidance.</p> <p>Ensure the contingency plan outlines extra action to take if the number of positive cases substantially</p>							

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			<p>increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, whichever of these thresholds is reached first:</p> <ul style="list-style-type: none"> • 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or • 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period <p>At the point of reaching a threshold (outlined at the top of the document), review and reinforce the testing, hygiene and ventilation measures already in place and consider:</p> <ul style="list-style-type: none"> • whether any activities could take place outdoors, including exercise, assemblies, or classes • ways to improve ventilation indoors, where this would not significantly impact thermal comfort • one-off enhanced cleaning focussing on touch points and any shared equipment <p>If outbreak at the site, bubbles to be reintroduced and staff to increase frequency of lateral flow testing.</p>							

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3.	Site Safety risks <ul style="list-style-type: none"> • Fire procedures • Lockdown • Movement for lunch / transitions • Toilets • Security including risk of theft • Data breaches 	All members of the school community	SLT lead identified – Kayleigh Vile Continue taking the attendance register and following up any absences in line with statutory guidance. School to follow risk assessments for premises and accessing outside equipment and areas. Toilets to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet. Share any updated fire evacuation information with all staff during daily briefing and with children. High expectations of how children move around school upheld by all members of staff. Any incidents are logged, and the risk assessment is evaluated, and changes made as a result of lessons learned. Reconsider e-safety policies and procedures in light of lessons learned during home learning. Arrange emergency drills as normal upon the return to school to ensure pupils are familiar with any changes Fire Drills planned to take place termly	2	4	8				

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4.	Risk of transmission between parents and pupils during school drop-off and collection times	All members of the school community	<p>Any parents who have had a positive test or who are displaying symptoms of COVID-19 should not be attending the school.</p> <p>Schools might consider issuing their own guidelines for Covid-safe behaviour on the premises. Any such guidance should be written up in consultation and collaboration with parents and pupils.</p> <p>If outbreak at the site, parents not to enter school site without appointment. Pick up and collection will mean parents stay off site and children are brought to them. Parents to socially distance and wear masks whilst waiting.</p>	2	4	8				
5.	<p>Risks of possible transmission to pupils who travel to school by dedicated school transport (including statutory provision) or wider public transport</p> <p>The Actions for schools during the Coronavirus Outbreak details the framework for transporting pupils to and from schools</p>	Pupils	No pupils at Chiddingly travel by school transport.							

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6.	Risk of ongoing contamination from people (staff, parents/carers, visitors, contractors and/or deliveries) coming into school	All members of the school community	<p>Ensure contractors, school meal providers, milk providers and fruit providers can fulfil all risk assessment requirements.</p> <p>Communicate clearly that anyone displaying symptoms of COVID-19 should not attend school and arrange to take a PCR test as soon as possible.</p> <p>Make arrangements for strict handwashing/sanitising procedures in place as soon as pupils/staff/visitors/contractors arrive in school.</p> <p>Volunteers and visitors are welcome to visit schools but should be made aware of the control measures.</p> <p>Before visitors attend performances or sporting events, the school will encourage them to self-assess for symptoms of coronavirus (COVID-19). These are:</p> <ul style="list-style-type: none"> • a high temperature • a new, continuous cough • a loss of, or change to, your sense of smell or taste <p>If outbreak at the site, non-essential visitors and volunteers will not attend site during school hours. Essential visitors, contractors and volunteers will be informed of the outbreak prior to attending site.</p>	2	4	8				

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7.	Risk that contamination exists within the school environment due to ineffective hygiene measures.	All members of the school community	<p>Regular cleaning should take place of equipment and areas.</p> <p>Risk assessment to identify any areas where cleaning should be more frequent.</p> <p>Enhanced cleaning schedule in place to ensure effective hygiene standards comply with latest guidance - cleaning of non-healthcare settings.</p> <p>All handwashing sinks, soap dispensers, hand gel etc. are checked 3 times a day to ensure stock levels are adequate.</p> <p>School leaders to inspect daily to ensure good/effective hygiene levels.</p> <p>If outbreak at the site, staff will clean tables and touch points at transition points to enhance cleaning on site. Cleaning contractors will be informed of outbreak.</p>	2	4	8				
8.	Risk of transmission from pupils and staff who have been in contact with the virus and/or are showing signs of having the virus (a new, continuous cough or a high temperature)	All members of the school community	The PCR test kits sent to schools can be used in the exceptional circumstance that an individual becomes symptomatic, and schools believe they may have barriers to accessing testing elsewhere. It is for schools to determine how to prioritise the distribution of their test kits in order to minimise the impact of the virus on the education of their pupils.	2	4	8				

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			<p>These kits can be given directly to staff or parents and carers collecting a child who has developed symptoms at school.</p> <p>If anyone in the school becomes unwell with a new and persistent cough or a high temperature, or has a loss of or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to follow guidance for households with possible or confirmed coronavirus (COVID-19) infection,</p> <p>If a pupil is awaiting collection, they should wait in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. A member of staff will supervise the pupil awaiting collection. The Rainbow Room will be used for this.</p> <p>Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the use of PPE in education, childcare and children's social care settings guidance. Any rooms they use should be cleaned after they have left.</p> <p>The household (including any siblings) should follow the PHE stay at home guidance for households with</p>							


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			<p>possible or confirmed coronavirus (COVID-19) infection.</p> <p>Headteachers should communicate to staff that if they are displaying symptoms they should be tested 'as soon as practicably possible.'</p> <p>Positive cases and symptoms Communicate to parents that contacts from a school setting will only be traced by NHS Test and Trace where the positive case and/or their parent specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact.</p> <p>Individuals are not required to self-isolate if they live in the same household as someone with COVID-19, or are a close contact of someone with COVID-19, and any of the following apply:</p> <ul style="list-style-type: none"> • they are fully vaccinated • they are below the age of 18 years and 6 months • they have taken part in or are currently part of an approved COVID-19 vaccine trial • they are not able to get vaccinated for medical reasons <p>Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive</p>							

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			<p>case and advised to take a <u>PCR test</u>. We would encourage all individuals to take a PCR test if advised to do so.</p> <p>Staff who do not need to isolate, and children and young people aged under 18 years 6 months who usually attend school, and have been identified as a close contact, should continue to attend school as normal. They do not need to wear a face covering within the school, but it is expected and recommended that these are worn when travelling on public or dedicated transport.</p> <p>Seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19. Hospitalisation could indicate increased severity of illness or a new variant of concern. Settings may be offered public health support in managing risk assessments and communicating with staff and parents.</p> <p>Be clear about the thresholds for contacting PHE (listed above and at the top of the contingency plan)</p>							
9.	Contingency planning	All pupils and staff	Contingency plans are in place and reviewed regularly. See LA model contingency plan (available via the Message Board).	2	4	8				

Action Plan (when will the above additional control measures be implemented and by whom?)

Action	By Whom?	Deadline	Date Completed

Signature and review

Name of Manager:	James Procter-Executive Head Alan Brundle-Chair of Governors	Signature of Manager:		Date:	27.1.22
1st review undertaken on:		Signature of Manager:		Date:	
2nd review undertaken on:		Signature of Manager:		Date:	
3rd review undertaken on:		Signature of Manager:		Date:	