

RISK ASSESSMENT

Workplace	East Hoathly Primary School and Nursery	Likelihood (L)	Х	Severity (S)
Department	Whole School	Almost Impossible	1	Insignificant (minor injury, no time off)
Risk Assessor	Vicky Lewis	Unlikely	2	Minor (injury and up to 7 days off)
Room/Area	Whole school and Nursery site	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	9.12.21	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 model document was updated on 3rd December 2021.

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,	Who is at	Control measures	Ri	sk Ra	ting	What additional control measures can be put in		vised Ratin	
(the	foreseeable, hazards? e dangers that can cause harm)	Risk?		L	S	R	place to reduce the risk further?	L	S	R
1.	Potential transmission to clinically vulnerable staff and pupils Guidance is available in the Actions for schools during the Coronavirus Outbreak	All members of school community	Ensure that there is an understanding that: 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. 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. Unless they are CEV, encourage parents/carers and staff to follow the guidance that applies to everyone 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	2	4	8				

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		precautions they can continue to take. Further information can be found in the <u>guidance on protecting people who are CEV from COVID-19</u> .							
		Conduct an Individual Risk Assessment to help identify any additional action that needs to be taken to mitigate risks for any CEV members of staff or anyone with risk factors which make them more vulnerable to Covid 19. This includes pregnant members of staff.							
		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							
		The school will continue to assess the health and safety risks to staff and meet their equality duties as per their local procedures.							
		Governors and leaders should pay regard to the wellbeing of all staff including the headteacher.							
		Schools should ensure they have explained to all staff the measures they are proposing putting in place and involve all staff in that process.							
		While members of these groups are no longer required to shield, the school should appreciate							

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			arrangements being made for them to reduce their face-to-face contact during periods of high viral prevalence. No CEV staff or pupils at EH. 2 staff members previously considered to be CV. If outbreak at the site, those staff members to work from home or at a federation school.							
			Health and safety advice for schools							
	Risk of ongoing contamination from pupils and staff	All members of the school community	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. Music and PE lessons can continue as normal. However, schools should ensure that control measures are in place and well communicated:							
2.	and staff		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.	2	4	8				
			Ensure sufficient and proportionate handwashing supplies and cleaning materials are available. Where							

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		a sink is not nearby, provide hand sanitiser in classrooms and other learning environments. Respiratory hygiene: The 'catch it, bin it, kill it' approach continues to be adhered to in school.							
		Cleaning: Areas and equipment are cleaned regularly with a particular focus on frequently touched surfaces							
		The school follows the government guidance on cleaning of non-healthcare settings.							
		Ventilation:							
		The school will be well ventilated with windows and doors opened to create air flow.							
		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.							
		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.							
		Adjust any mechanical ventilation systems to increase the ventilation rate where possible and check to							

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			confirm that normal operation meets current guidance and that only fresh outside air is circulated.							
			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.							
			Contingency plans are in place outlining how the school would operate if there were an outbreak within school or local area.							
			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.							
			Communicate to parents that pupils should not come into school if they have symptoms or have had a positive test result.							
			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.							

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			Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the use of PPE in HYPERLINK "https://www.gov.uk/government/publications/safeworking-in-education-childcare-and-childrens-social-care"education, childcare and children's social care settings guidance. Testing Close contacts in schools are now identified by NHS Test and Trace and education settings are not expected to undertake contact tracing. All individuals who have been identified as a close contact of a suspected or confirmed case of the Omicron variant of COVID-19, irrespective of vaccination status and age, will be contacted directly and required to self-isolate immediately and asked to book a PCR test. They will be informed by the local health protection team or NHS Test and Trace if they fall into this category and provided details about self-isolation. Further actions for educational settings may be advised by a local Incident Management Team (IMT)							

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eable, hazards? s that can cause harm)	Risk?		L	S	R	place to reduce the risk further?	L	S	R
		investigating a suspected or confirmed case of the Omicron variant of COVID-19.							
		Communicate to parents that staff and pupils with a positive LFD test result should self-isolate in line with the stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection. They will also need to get a free PCR test to check if they have COVID-19.							
		Whilst awaiting the PCR result, the individual should continue to self-isolate. Additional information on PCR test kits for schools and further education providers is available.							
		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 COVID-19 travel restrictions, for the period they are abroad.							
		The remote education provided should be equivalent in length to the core teaching pupils would receive in school. Schools should work							

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		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/ 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 promoting and supporting mental health and wellbeing in schools. 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.							

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		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. Schools should continue to offer wraparound provision, such as breakfast and after-school clubs, for those children eligible to attend school to help support the children of critical workers. Face Coverings 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. Schools should have a process for managing face coverings in school that is clearly communicated. In primary schools, it is recommended that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas. Health advice continues to be that children in primary schools and early years children should not be asked to wear face coverings. Face coverings do not need to be worn when outdoors.							

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			Safe wearing of face coverings requires cleaning of hands before and after touching – including to remove or put them on – and the safe storage of them in individual, sealable plastic bags between use.							
			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.							
			Ensure all the usual building checks are undertaken to make the school safe.							
			Health and Safety, and safeguarding policies and practices kept up to date in line with current DfE guidance.							
			Keep risk assessments under regular review in line with government guidance.							
			Ensure the contingency plan outlines extra action to take if the number of positive cases substantially increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education							

What are the significant, foreseeable, hazards?	Who is at	Control measures	Ris	k Ra	ting	What additional control measures can be put in		ised Rating	
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		and childcare settings, whichever of these thresholds is reached first:							
		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							
		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: • 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							
		Bubbles in wraparound provision are not required but the measures around cleaning, hand washing, and ventilation should be in place. Bubbles in wraparound care would need to be reintroduced if the school is in outbreak status							

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			If outbreak at the site, bubbles to be reintroduced and staff to increase frequency of lateral flow testing.							
		All members of the school community	SLT lead identified – Vicky Lewis Continue taking the <u>attendance register</u> and following up any absences in line with statutory guidance.							
			School to follow risk assessments for premises and accessing outside equipment and areas.							
	Site Safety risks • Fire procedures • Lockdown		Toilets to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet.							
3.	Movement for lunch / transitions Tailets		Share any updated fire evacuation information with all staff during daily briefing and with children.	2	4	8				
	ToiletsSecurity including risk of theft		High expectations of how children move around school upheld by all members of staff.							
	Data breaches		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							

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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	Any parents who have had a positive test or who are displaying symptoms of COVID-19 should not be attending the school. 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.	2	4	8				
5.	Risks of possible transmission to pupils who travel to school by dedicated school transport (including statutory provision) or wider public transport The Actions for schools during the Coronavirus Outbreak details the framework for transporting pupils to and from schools	Pupils	No pupils at East Hoathly travel by school transport.							
6.	Risk of ongoing contamination from	All members	In primary schools, it is recommended that face coverings should be worn by staff and adults	2	4	8				

What are the significant, Who is at Control measures	Risk Rating		ting What additional control measures can be put in			Risk 3
foreseeable, hazards? (the dangers that can cause harm) Risk?	L S	R	place to reduce the risk further?	L	S	R
people (staff, parents/carers, visitors, contractors and/or deliveries) coming into school school of the school community deliveries) coming into school Community of the school community of the school mand community and community and community of the school mand community and community and community of the school mand community and community and community and community and community and community of the school mand community and c			further?			

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(the	foreseeable, hazards? e dangers that can cause harm)	Risk?			S	R	place to reduce the risk further?	L	S	R	
7.	Risk that contamination exists within the school environment due to ineffective hygiene measures.	All members of the school community	Regular cleaning should take place of equipment and areas. Risk assessment to identify any areas where cleaning should be more frequent. Enhanced cleaning schedule in place to ensure effective hygiene standards comply with latest guidance - cleaning of non-healthcare settings. All handwashing sinks, soap dispensers, hand gel etc. are checked 3 times a day to ensure stock levels are adequate. School leaders to inspect daily to ensure good/effective hygiene levels. 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.	2	4	∞					
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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(the dangers that can		Risk?		L	S	R	place to reduce the risk further?	L	S	R
			These kits can be given directly to staff or parents and carers collecting a child who has developed symptoms at school.							
			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,							
			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.							
			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.							
			The household (including any siblings) should follow the PHE stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection.							

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			Headteachers should communicate to staff that if they are displaying symptoms they should be tested 'as soon as practicably possible.'							
			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.							
			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:							
			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							
			Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a <u>PCR test</u> . We would encourage all individuals to take a PCR test if advised to do so.							

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			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. 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. Be clear about the thresholds for contacting PHE (listed above and at the top of the contingency plan)								
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 Alan Brundle	Signature of Manager:	Han Smalle J. Proder	Date:	9.12.21
1 st review undertaken on:		Signature of Manager:		Date:	
2 nd review undertaken on:		Signature of Manager:		Date:	
3 rd review undertaken on:		Signature of Manager:		Date:	