Introduction

Context

Coronavirus COVID-19 may be present in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing. Transmission occurs directly between people when virus expelled by an infected person comes into contact with the mouth and/or nose and/or eyes of another person. Transmission also occurs indirectly when the virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).

Most people infected with the virus experience disease with mild or moderate symptoms, however a significant minority become severely unwell requiring hospitalisation and for some people the disease may present long lasting, life changing consequences, or is fatal.

Basic Principles.

The control measures follow the basic principles outlined in the current advice provided by government. Around safe social distancing, hand and respiratory hygiene, self- awareness of risk groups (clinically extremely vulnerable, clinically vulnerable, general population) and of symptoms of high temperature and / or new continuous cough and/or loss of, or change in, normal sense of taste or smell_as a symptom. If you have these symptoms, no matter how mild, book a test at www.gov.uk/get-coronavirus-test or order or book a test by calling 119, as soon as possible.

The Risk Assessment.

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

Remember - Hands. Face. Space. Ventilation.

Hands Wash your hands well and often.

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

People are expected to and recommended to wear a face covering in crowded or enclosed spaces, where you may come into contact with

people you don't normally meet. This includes public transport and dedicated transport to school.

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

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

of both.

Consultation.

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

Equalities.

The risk assessment includes specific review of the potential higher risks to people on basis of gender, ethnicity and disability. (See Section 8)

Risk Assessment	Managing COVID-19 for Autumn Term 2021			
Task/Activity:	Implementing Protective Measures to Mitigate against Covid-19 Infection			
School	Bader Primary School			
	V7.0 (2 nd September 2021)			



Quality Assurance Check by Manager / Line	Date:	
Manager		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
1. Community level of Risk	In the event of notification of 'local lockdown' or national lockdown being reintroduced, the school will close immediately.	Where the infection rate locally, is above 1, and the Council are advising their schools not to reopen, the Trust schools will close, in step with the Council.	CEO and Gold Command	On going	
	In the case that the school closes, due to lockdown or it is unable to remain open for safety or capacity reasons, inform the LA using TellUsOnce www.stockton.gov.uk/tellusonce	The Trust will follow the DfE national guidance for the return to school in Sept. This is reflected in this updated Risk Assessment V7.0	DFO		
		The Trust is in regular contact with Stockton Council via the Director of Children's Services and Stockton Public Health Team.	Head / DFO		
2. Dept of Education Contingency Framework.	The contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings and sets out that local authorities, Directors of Public Health and PHE health protection teams are responsible for managing localised outbreaks and that they play an important role in providing support and advice to education and childcare settings.	In the event of a sustained outbreak the school will consult Stockton Public Health. We will revert to some to all of the controls set out in the Summer Term 2021 Risk Assessment. The Risk Assessment will then be updated to	Gold Command and CEO	As necessary	
	Public Health England may produce an outbreak plan template and that would then supersede this document.	reflect those more stringent controls.	51.0		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
3. Additional local measures	The Contingency framework. may be supported by further control measures which may include amongst others:	If there is a substantial increase in the number of positive cases or if central government offers the area an enhanced response package, the school shall follow any instruction provided by Director of Public Health including any temporary reintroduction of some control measures.	Gold Command		
4. Thresholds for triggering extra action	The Operational Guidance sets out the measures that all education settings should have in place to manage transmission of COVID-19 day to day. For most settings it will make sense to think about taking extra action if the number of positive cases substantially increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned.	Stockton Public Health or national guidance may determine that further additional action should be taken. This may include: • Strengthened Communication • Temporarily Reinstating face Coverings • Reinstating On-site LFD Testing • Increased Frequency of Testing. In the event of a sustained outbreak the school will consult Stockton Public Health. We will revert to some to all of the controls set out in the Summer Term 2021 Risk Assessment. Extra actions.	Gold Command CEO Stockton Public Health		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	For most education and childcare settings, thresholds for outbreaks are: • 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or	When the thresholds are reached, education and childcare settings should review and reinforce the testing, hygiene and ventilation measures they already have in place. Settings should also 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. From the autumn term, the Stockton-on-Tees Public Health team will continue to be available for advice, guidance and management of outbreaks. Please continue to report cases into the local team at www.digital.stockton.gov.uk/covid19-contactus	DFO / Heads		
5. Schools clinically extremely vulnerable workforce	Clinically extremely vulnerable people should currently attend school or their place of work unless specifically advised against this by their clinician or GP.	Further details of CEV people available at Appendix 1. Clinically Extremely Vulnerable staff will be individually risk assessed, taking into account the national guidance.	HR Manager		
6. Clinically extremely vulnerable children.	The government announced on the 26th August that Children and young people will no longer be classed as clinically extremely vulnerable.	All children and young people should continue to follow the same guidance as everyone else, which can be found at www.gov.uk/coronavirus .	Heads		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	An update from the Department for Education confirmed that Clinical studies have shown that children and young people, including those originally considered to be clinically extremely vulnerable (CEV), are at very low risk of serious illness if they catch the virus The UK Clinical Review Panel has recommended that all children and young people under the age of 18 should no longer be considered CEV and should be removed from the Shielded Patient List, the national database of people considered clinically extremely vulnerable.	For a very few individual children specific clinical advice may be given and this should continue to be followed.			
7. Pregnant employees	There is a long-standing requirement for Employers to put in place measures to support pregnant employees in the workplace and carry out an Expectant Mothers Risk Assessment. Pregnant women of any gestation should only continue working if the Expectant Mothers risk assessment and Individual Risk Assessment advises that it is safe to do so. 28 weeks pregnancy and beyond, or pregnant with underlying health conditions that place them at greater risk of severe illness from COVID-19 at any gestation, can work from home or be offered alternative work to limit contact with others or where either is not possible refrain from work. This is because although they are at no more risk of contracting the virus than any other non-pregnant person who is in similar health, they	In addition to the standard Expectant Mothers Risk Assessment, a COVID-19 Individual Risk Assessment should be carried out. All risk assessments will be carried out by the Trust HR Manager, using the Trust Vulnerable Individual Risk Assessment guidance, to ensure consistency. Some pregnant workers may be at greater risk of severe illness from COVID-19 and this should be taken into account in the Individual Risk Assessment with the identification of control measures specifically to protect against COVID-19 infection. If control measures can not be put in place and alternative working options are not available, the person should refrain from work. This is in line with normal requirements of the Management of Health and Safety at Work Regulations 1999. Government guidance for pregnant workers.	Heads HR Manager	On going	

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	have an increased risk of becoming severely ill and of pre-term birth if they contract COVID-19.	The Royal College of Obstetrics and Gynaecology (RCOG) has also published information on Coronavirus infection and pregnancy.			
8. Equality	All staff, as duty holders, shall have regard for the particular needs of different groups of workers or individuals. For example, those with underlying health conditions, pregnant staff and those with protected characteristics. Managers must consider and put into place any particular measures or reasonable adjustments to take account of the employer's obligations under the Equality Act.	The Trust has considered on case by case basis any additional risk arising from Covid19 to BME staff and staff with disabilities. The Trust will continue to consult staff and Trade Unions.	All staff where necessary Heads HR Manager	Ongoing.	
9. Mental wellbeing	Staff and pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. You can access useful links and sources of support on promoting and supporting mental health and wellbeing in schools.	Useful links and sources of support on promoting and supporting mental health and wellbeing in schools is available here . HR will provide support and guidance on a case by case basis to staff as required. Confidential counselling line (MIND) is available	Heads HR manager		
10. Wearing face coverings	Face coverings are no longer advised by the DfE for pupils, staff and visitors, either in classrooms or communal areas. No pupil or student should be denied education on the grounds of whether they are, or are not, wearing a face covering.	to all staff.	Heads Gold Command		
	We shall make reasonable adjustments in consultation with parents and children to support	Public Health may advise that face coverings should temporarily be worn in communal areas	Solu Command		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	disabled pupils to ensure they can access education successfully.	or classrooms (by pupils, staff and visitors, unless exempt).			
		The school's outbreak management plans should cover this possibility.			
11. Mixing and bubbles.	From the start of the autumn term, it will no longer be necessary to keep children in consistent groups, or bubbles.	The school's outbreak management plan will make provision for the reintroduction of temporary bubbles to reduce mixing between groups, in the event of an outbreak.			
12. Hand hygiene	Frequent and thorough hand cleaning continues to be important in the prevention of infection. Pupils, staff and visitors should ensure they clean their hands regularly with soap and water or hand sanitiser.	Hand sanitiser units will be deployed in classrooms and communal areas	Heads Site teams		
13. Respiratory hygiene	'Catch it, bin it, kill it' continues to be important. Catch it, bin it, kill it posters.	The <u>e-Bug COVID-19</u> website contains free resources for you, including materials to encourage good hand and respiratory hygiene.			
14. Personal Protective Equipment [PPE]	Most staff in schools will NOT require PPE beyond what they would usually require for their work. The guidance on the use of PPE in education, childcare and children's social care settings provides more information on the use of PPE for COVID-19.	PPE will be provided for those staff who need it. Staff working in the Testing Centre will have training and be provided with PPE as per the guidance on testing centres.	Heads / DFO Testing Centre Coordinators		
15. Cleaning regimes	School should maintain their elevated cleansing of regularly contacted surfaces. PHE has published guidance on the cleaning of non-healthcare settings.	Cleaning materials in each classroom for staff to use across the day as required. Wipes will be available to each classroom and for work stations to be cleaned by staff if moving classrooms.	DFO Heads		
16. Effective ventilation.	School staff should consider and include effective ventilation alongside other control	School staff should be able to identify any poorly ventilated spaces and take steps to improve air flow in these areas.	Heads DFO		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	measures to reduce risk of transmission within classrooms and other work spaces.	Windows will be kept open to maximise air flow.	All staff		
17. Dealing with symptomatic cases or positive tests.	Pupils, staff and other adults should self isolate straight away and get a PCR test as soon as possible if they have any of these 3 symptoms of COVID-19, even if they are mild: • a high temperature • a new continuous cough • or a loss or change to the sense of taste or smell, or have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine). Pupils, staff and other adults should follow public health advice on when to isolate and what to do. Staff and pupils should not come to school if: * they have tested positive with a LFT * are symptomatic * have tested positive with a PCR. They should inform the school as soon as possible.	Pupils or staff who exhibit Covid19 symptoms whilst at school will be sent home. The Head will approve all such decisions. People with symptoms should avoid using public transport and, wherever possible, be collected by a member of their family or household. 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.	Heads		
18. Use of Confirmatory PCR tests	Staff and pupils with a positive LFD test result should self-isolate in line with the stay at home guidance. 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.	If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.	Heads		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
		Additional information on PCR test kits for schools and further education providers is available.			
		The school will ask for a copy of positive PCR tests and log the names, so as to be able to monitor the overall level of cases in the school community.			
19. Individuals NOT required to isolate	From 16 August, people will not be required to self-isolate if they live in the same household as someone with COVID-19 and any of the following apply: • You are fully vaccinated • you are below the age of 18 years 6 months • you have taken part in or are currently part of an approved COVID-19 vaccine trial • you are not able to get vaccinated for medical reasons. Fully vaccinated means that you have been vaccinated with an MHRA approved COVID-19 vaccine in the UK, and at least 14 days have passed since you received the recommended doses of that vaccine. However, people should not arrange to have a PCR test if they have previously received a positive PCR test result in the last 90 days, unless you develop any new symptoms of COVID-19, as it is possible for PCR tests to remain positive for some time after COVID-19 infection.	They will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so. 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. 18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact.			

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
20. Admitting symptomatic children into school	In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others.	If a parent or carer insists on a pupil attending your school, the school can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19.	Head		
21. Lateral flow device testing – ongoing for staff and pupils.	All staff in primary schools and secondary schools should test themselves using lateral flow device tests twice per week at home, until the end of September, when this will be reviewed. All early years and wraparound childcare staff should also continue to test twice weekly as they have done throughout the summer.	Those who test positive should isolate, take a confirmatory polymerase chain reaction (PCR) test, and continue to isolate if the result is positive. Schools will distribute home testing kits as supplied by DfE to staff and secondary students as directed.	Heads		
22. First aid and first responders	Due to the nature of first responders providing immediate assistance to individuals who may have coronavirus infection, use of personal protective equipment and infection prevention and control measures should continue to be practised by first responders. Guidance for first aiders and first responders	Effective hand hygiene. Personal protective equipment. • Disposable gloves and plastic apron • Fluid resistant surgical face mask • If splashes or droplets of blood or body fluids likely – use disposable eye protection, face visor or goggles.	All first aiders		
	The school's first aid assessment should be reviewed to ensure an adequate provision, including at least one paediatric First Aider present at all times in Primary schools. Advice from the St John Ambulance is available here.	Keep others at least 2ms away. Avoid mouth-to-mouth during CPR – apply compressions only, unless in the case of a child patient – use a resuscitation face shield.			
23. Educational visits	From the 1 st September, all types of residential visits within the UK for all schools and settings is allowed. The school shall undertake full and thorough risk assessments in relation to all educational visits	School's residential trip risk assessments must include a planned and prepared contingency arrangement to respond to supervisory staff or students becoming symptomatic or testing positive with a lateral flow device during the trip.	All staff and educational visits co-ordinators.	During the planning of any educational visit.	

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
	and ensure that any public health advice, such as, minimising contact with others, maintaining:	Travel time to return to home should be minimised. 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. The school should consult the SBC health and safety team when considering visits re risk assessment. Given the likely gap in COVID-19 related cancellation insurance, if you are considering booking a new visit, whether domestic or international, you are advised to ensure that any new bookings have adequate financial protection in place. General guidance about educational visits is available and is supported by specialist advice from the Outdoor Education Advisory Panel.			
24. School visitors or contractors	Visiting contractors should be made of the school's control measures and ways of working.	Visiting contractors should be asked – as part of the school's Control of Contractors arrangements, for confirmation of a recent negative lateral flow device test before being permitted to access the premises.			
25. Wrap- around provision and extra care	Information on planning extra curricular provision can be found in the guidance for providers who run community activities, holiday clubs, after school clubs, tuition and other out of school provision for children,	Protective measures for holiday or after-school clubs and other out-of-school settings for children during the coronavirus (COVID-19) outbreak. Go Sports and Go Music will follow the national guidance for the relevant Sporting Bodies. They	Heads Director of Go Sports and Music		

Activity to Manage	Current Control Measures	Additional Control Measures	Action by who?	Action by when?	Done
		will adhere to any additional controls on host the school site(s).			
26. Vaccination	Vaccinated staff (and students) are at a lower risk from Covid19. The Trust will encourage all its staff to get vaccinated against Covid19 and other seasonal illnesses eg Flu.	The Trust will cooperate with Stockton Public Health in event of any roll out of vaccination for its students. A flu vaccination programme will be offered to at risk staff.	CEO HR Manager	By mid Nov 21	
27. Return of Secondary pupils - lateral flow device testing	All secondary school pupils should receive 2 on-site lateral flow device tests, 3 to 5 days apart, on their return in the autumn term. Secondary school settings may commence testing from 3 working days before the start of term and can stagger return of pupils across the first week to manage this.	Test centre set up in new school Hall and team used last time reassembled. Pupils should then continue to test themselves twice weekly at home using a lateral flow device until the end of September, when this will be reviewed. See Separate Risk Assessment for Testing Centre	Deputy Head DFO / TC Coordinator	27th Aug 21	Done
28. Any other school specific risk?					

Reviewers	Name	Date	Comments
1 st Review by			
QA Check by			
2 nd Review by			
QA Check by			
3 rd Review by			
QA Check by			

Date	Revisions - state changes introduced			
27.8.21	Updated to reflect The Schools Operational Guidance 18.8.21 Schools Contingency Framework – August 2021 Children no longer considered clinically extremely vulnerable and removed from the Shielded Patients List 26.8.21.			

Appendix 1. People more at risk from Coronavirus.

Clinically extremely vulnerable

People with the following conditions are automatically deemed clinically extremely vulnerable and therefore have been previously included on the Shielded Patient List:

- solid organ transplant recipients
- people with specific cancers:
- people with cancer who are undergoing active chemotherapy
- · people with lung cancer who are undergoing radical radiotherapy
- people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment people having immunotherapy or other continuing antibody treatments for cancer
- people having other targeted cancer treatments that can affect the immune system, such as protein kinase inhibitors or PARP inhibitors people who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs
- people with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD)
- people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell disease)
- people on immunosuppression therapies sufficient to significantly increase risk of infection
- problems with your spleen, for example splenectomy (having your spleen removed)
- · adults with Down's syndrome
- adults on dialysis or with chronic kidney disease (stage 5)
- women who are pregnant with significant heart disease, congenital or acquired
- other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs GPs and hospital clinicians have been provided with guidance to support these decisions

Appendix 2 Guidance and sources

This document is current at the date published, but expect the government's guidance to be revised and updated regularly. Schools should check the relevant government websites for new and revised guidance at:

- · Health and Safety Executive,
- Gov.UK
- National Health Service
- Public Health England
- NHS 111 online.
- Guidance for schools
- Guidance for early years and childcare providers
- Guidance for special schools and other specialist settings
- Schools operational guidance
- Actions for early years and childcare providers
- Actions for FE colleges and providers
- Special schools and other specialist settings
- What parents and carers need to know about early years providers, schools and colleges during COVID-19
- Contingency framework

The Local Authority Public Health Team can be contacted at: www.digital.stockton.gov.uk/covid19-contactus or 01642 528474.

For Health and Safety enquiries, contact healthandsafetyunit@stockton.gov.uk or 01642 528195