

(COVID 19 – School Risk Assessment)

Names of Assessors:	Pippa Irwin (HT) Jane May (DHT) Katy Hall (SBM)	Date Completed:	<u>03.09.2021</u>
Activity Being Assessed:	COVID 19 risks associated with employees and relevant others accessing and working from school premises (This supersedes previous school COVID-19 risk assessments).		

Risk Matrix Table					
Severity	Likelihood of harm				
	1 – Very Unlikely	2 - Unlikely	3 - Possible	4 – Likely	5 – Very Likely
1 – Extremely Low (Trivial injury)	1	2	3	4	5
2 - Low (Minor injury)	2	4	6	8	10
3- Medium (Lost Time injury)	3	6	9	12	15
4 - High (Specified injury)	4	8	12	16	20
5 - Extremely High (Fatality)	5	10	15	20	25

- Identify significant hazards and who could be harmed (E – Employees, SU – Service Users, VP - Vulnerable Persons, V – Visitors, P - Members of the Public, C – Contractors, ES - Emergency Services)
- Once the significant hazards and existing control measures have been identified, the remaining risks need to be rated.
- The risk matrix table above can be used to calculate the overall risk rating by multiplying the relevant numbers assigned to the likelihood and the severity of each hazard.
- Once the overall risk rating has been calculated for each hazard, the table below will indicate if further action is required to control the risks.
- The action register should be used to document any additional control measures required.
- Once additional control measures have been implemented the risk rating will need to be reassessed and the additional control measures incorporated into the main assessment.

Overall Risk Rating	Action Required
(1- 5) Low Risk	Maintain existing control measures
(6 - 12) Medium Risk	Review existing control measures and where possible add additional control measures to further reduce the risk.
(15 - 16) High Risk	Consideration given to stopping the activity. Additional control measures are required to reduce risks to acceptable level.

(20 – 25) Extremely High Risk

Stop activity until additional control measures are implemented to reduce risk to an acceptable level.

Ref	Hazard Identification & Associated Risks	Who could be harmed? (E, SU, VP, V, P, C, ES)	Existing Control Measures	Residual Risk Rating		
				Likelihood	Severity	Overall Risk
1.	Risk of ill health as a result of contracting COVID 19	E, VP, C, P	<p>Staff and relevant others (parents/guardians of pupils attending educational setting) to be aware of the main symptoms of COVID 19:-</p> <ul style="list-style-type: none"> - a new continuous cough - a high temperature - a loss of, or change in, your normal sense of taste or smell (anosmia) <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>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.</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>	2	5	10

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			<p>Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is a substantial increase in the number of positive cases in a setting (see Stepping measures up and down section for more information) or if central government offers the area an enhanced response package, a director of public health or health protection team, might advise a setting to temporarily reintroduce some control measures.</p> <p>However, if experiencing any of the above symptoms staff and pupils should avoid coming into work and get a COVID 19 PCR test as soon as possible.</p> <p>If the test comes back positive staff and pupils to follow the most up to date government guidance on isolation:-</p> <ul style="list-style-type: none"> - Stay at home for a period of 10 days <p>NOTE:- Regardless of vaccination status, staff are still required to self-isolate following a positive result.</p> <p>Where eligible, staff and pupils are encouraged to participate in the vaccination programme.</p> <p>Arrangements in place for lateral flow testing in accordance with most up to date government guidance for education.</p>			
2.	Risk of ill health as a result of inadequate control measures to prevent the transmission of COVID 19.	E, VP, C, P	<p>All staff and relevant others must comply with the most up to date government guidance on preventative measures set out below:-</p> <p>1. Hand hygiene</p> <ul style="list-style-type: none"> - Wash or sanitise hands regularly i.e. clean their hands on arrival at the setting before & after eating and after sneezing or coughing - Pupils encouraged not to touch their mouth, eyes and nose - Avoid handshakes and touching face with hands - Consider how to encourage young children to learn and practice these habits through games, songs & repetition. - Ensure that help is available for children and young people who have trouble cleaning their hands independently 	2	5	10

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			<p>Respiratory hygiene</p> <ul style="list-style-type: none"> - Use of face coverings when in enclosed spaces - Use of tissues – “Catch it, bin it, kill it”. - Access e-Bug COVID-19 website for free resources for schools, including materials to encourage good hand and respiratory hygiene. <p>2. Cleaning</p> <ul style="list-style-type: none"> - Regular cleaning of workplace, including sanitisation of high touch points and work stations - Put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. - Sanitise surfaces that children and young people are touching, such as toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters, more regularly than normal. - Remove unnecessary items from the classroom and other learning environments where there is space to store elsewhere. - Access PHE guidance on the cleaning of non-healthcare settings. <p>3. Ventilation - (see additional guidance in ref 4)</p> <ul style="list-style-type: none"> - Use of natural ventilation (windows and doors) to increase air flow. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). - Use of mechanical ventilation (linked to fresh air supply) to increase air flow. <p>4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.</p> <p>Posters to be displayed in prominent locations throughout the workplace including entrances to advise on COVID 19 control measures.</p> <p>Management to carry out routine checks to ensure COVID 19 control measures are fully implemented and complied with.</p>			

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3.	Risk of ill health as a result of inadequate ventilation to prevent the transmission of COVID 19.	E, VP, C, P	<p>Head Teacher will check with their facilities management contractor on the suitability of air quality in line with HSE guidance, within their allocated buildings and confirm suitability within the action register of this risk assessment.</p> <p>Head Teacher will liaise with their facilities management contractor to identify and assess areas within school with poor ventilation and determine the need to either restrict use of these areas or improve ventilation supply. NOTE: HSE recommended CO2 monitors can be used to determine areas requiring additional ventilation.</p> <p>Where installed, the setup of air conditioning systems has been reviewed and adjusted to maximise the intake of fresh air.</p> <p>Internal doors to be kept open to assist with air flow. NOTE: - Fire doors must not be wedged open and any fire doors which need to be kept open to assist with air flow, should be fitted with appropriate door release mechanisms or door guards.</p> <p>Ventilation in toilets should run 24/7. If windows are present then they should be opened as required to allow for regular air changes.</p> <p>During cooler weather:</p> <ul style="list-style-type: none"> • Windows are fully opened before rooms are occupied and during breaks. • Windows are kept partially open when rooms are in use, windows are selected that are not directly next to work areas/pupils desks or high level windows are open fully and low level opened partially • Information has been provided to parents, carers and pupils to dress appropriately for cooler temperatures. 	2	5	10
4.	Risk of ill health as a result of inadequate signing in process within buildings	E, VP, C, P	<p>Appropriate COVID 19 signage displayed at the entrance to buildings to advise staff and relevant others on the required control measures prior to entering the building.</p> <p>Perspex barriers in place at reception areas</p> <p>Alcohol gel or hand washing facilities to be provided upon entry to buildings and at strategic locations within buildings.</p> <p>Robust signing in procedures must be implemented within each building to enable contact tracing of those in contact with confirmed COVID 19 cases and in the event of an outbreak .</p>	2	5	10

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			<p>NOTE:- QR codes can still be used.</p> <p>Robust arrangements to be implemented to control visitors on site.</p> <p>Entry prohibited for any staff or visitors displaying signs and symptoms of COVID 19.</p>			
5.	Risk of ill health as a result of inadequate control of visitors and contractors	E, VP, C, P	<p>Head teacher / Leadership team to reduce the number of visitors where possible with the introduction of alternative methods of working such as use of Microsoft Teams / Zoom – IT based solutions.</p> <p>If face to face visits are required then control measures to be implemented to reduce the risk of transmission as per (4 standard controls detailed in section 3) of this risk assessment.</p> <p>Contractors to provide suitable and sufficient risk assessments to individuals organising the works and comply with premises COVID 19 rules.</p>	2	5	10
6.	Risk of ill health as a result of contracting COVID 19 due to increased mixing of pupils / groups	E, VP, C, P	<p>The government no longer recommend that it is necessary to keep children in consistent groups ('bubbles').</p> <p>You should make sure your contingency plans (sometimes called outbreak management plans) cover the possibility that in some local areas it may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups.</p> <p>Any decision to recommend the reintroduction of 'bubbles' would not be taken lightly and would need to take account of the detrimental impact they can have on the delivery of education.</p> <p>Head teacher is to ensure that hand sanitiser or hand washing facilities to be provided upon entry to classrooms and at strategic locations within schools.</p> <p>Staff and pupils must wash their hands or use hand sanitiser upon entering the premises.</p> <p>School to follow the control measures outlined above in section 3 of this risk assessment.</p> <p>Access rooms directly from outside where possible.</p>	2	5	10

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			<p>Considering one-way circulation, or place a divider down the middle of the corridor to keep groups apart as they move through the setting where spaces are accessed by corridors.</p> <p>Robust signing in procedures must be implemented within each school to enable contact tracing of those in contact with confirmed COVID 19 cases.</p> <p>Implementation of electronic signing in process where possible. If not possible, receptionists to document visitor details to avoid cross contamination and potential spread of virus.</p> <p>Head teacher to consider where social distancing can be maintained between people including:</p> <ul style="list-style-type: none"> Continued cohorting of staff Continued utilisation of online meetings and training Keeping numbers minimised for face to face meetings and training Reduction of pinch points and areas of congestion <p>Furniture in areas such as reception, meeting rooms, staff rooms and offices has been rearranged to prevent face to face working and support social distancing where possible</p>			
7.	Risk of ill health as a result of contracting COVID 19 due to inadequate arrangements for movement around buildings.	E, VP, C, P	<p>Staff are advised to wear face coverings when moving around buildings.</p> <p>It is advised that one way systems are implemented within buildings and directional signage provided as required.</p> <p>Staff are advised to stick to left when using stairwells.</p> <p>Communal areas including, meeting rooms, toilets, lifts, kitchens and locker rooms are to be assessed to determine maximum occupancy levels and notices placed on doors to communicate the requirements for using these areas.</p> <p>Minimise use of meeting rooms where possible and consider alternative ways of working such as conference calls or other IT solutions.</p>	2	5	10

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			Meeting rooms are to be used as a last resort after consideration of IT solutions. If a meeting room is to be used for face to face meetings then the maximum occupancy of the room must not to be exceeded and the duration of the meeting kept to a minimum.			
8.	Risk of exposure to COVID 19 when staff or relevant others use welfare facilities including; Kitchen facilities and rest areas.	E, VP, C, P	<p>Consider staggering breaks to reduce overcrowding</p> <p>Disposable paper towels to be provided only – no multi use towels to be used.</p> <p>Shared touch points in staff areas such as those on microwaves, kettles and fridges are wiped down before and after use.</p> <p>All toilets and kitchens provided with hand washing facilities with soap, disposable towels and hot running water.</p> <p>Posters displayed in toilets and kitchens asking staff to wash their hands for twenty seconds using soap and water.</p> <p>Signage to be provided as to who to contact when stock requires replenishment.</p> <p>Government advice is to catch coughs and sneezes in tissues – Tissues available throughout the workplace.</p> <p>Water fountain high touch point requires to be added to the cleaning regime and staff reminded of hygiene measures when using the facility.</p>	2	5	10
9.	Risk of COVID 19 exposure or transmission as a result of inadequate fire safety arrangements.	E, VP, C, P, ES	<p>Head teacher is to review emergency evacuation procedures to ensure their premises emergency evacuation plan is suitable and that sufficient staff/fire wardens are available at all times to deal with a fire related incident or an alarm activation requiring evacuation.</p> <p>PEEPs to be reviewed as part of the overarching premises emergency evacuation plan to ensure adequate resources and equipment are available for those requiring assistance in evacuating the building.</p> <p>Fire evacuation plan to be fully communicated to all staff and relevant others working within the building.</p> <p>Fire drills to be conducted at required frequencies to determine effectiveness of the evacuation plan and documented on the fire evacuation report form. Post incident</p>	2	5	10

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			review to be carried out and actions implemented to improve any issues identified within the drill.			
10.	Risk of ill health from inadequate first aid arrangements.	E, VP, C, P, ES	<p>The Head Teacher will review the first aid risk assessment.</p> <p>The written first aid risk assessment should take into account all relevant factors with the aim of enabling the setting to ensure they can provide the safe care needed for staff and pupils during the COVID-19 pandemic, including:</p> <ul style="list-style-type: none"> • The number of children on the premises. • The staff to child ratios. • The types of activities undertaken with the children on the premises. • The likely need for first aid based on the needs of the children attending the premises. • First aider knowledge among staff on the premises; and • The mitigations available to reduce the risk of such an incident. <p>First aid arrangements to be communicated to staff and relevant others working within the building.</p> <p>Monitor arrangements for first aid provision on a regular basis and ensure adequate number of trained first aiders are in place in accordance with relevant risk assessments and government guidance.</p>	2	5	10
11.	Risk of ill health from COVID 19 as a result of inadequate transport arrangements	E, VP, C, P	<p>Encourage parents and children and young people to walk or cycle to their education setting where possible.</p> <p>On dedicated transport the government recommend that children and young people aged 11 and over continue to wear a face covering when travelling to secondary school or college</p> <p>Overcrowding on dedicated transport should be minimised.</p>	2	5	10
12.	Risk of ill health as a result of inadequate arrangements to deal with mental health issues	E,VP	<p>Management to promote mental health & wellbeing awareness to staff during the COVID 19 pandemic and will offer whatever support they can to support staff and relevant others.</p> <ul style="list-style-type: none"> • Regular welfare checks by management and staff. • Information available from school mental health first aiders 	2	5	10

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13.	Managing person within educational setting with suspect COVID 19	E, VP, C, P	<p>If anyone in school develops COVID 19 symptoms, however mild, they should be sent home and they should follow public health advice.</p> <p>If a pupil is awaiting collection,</p> <ul style="list-style-type: none"> • 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. • Any rooms they use should be thoroughly cleaned after they have left. 	2	5	10
14.	Risk of ill health as a result of contracting COVID 19 due to inadequate arrangements around contact tracing and self-isolation	E, VP, C, P	<p>Close contacts will now be identified via NHS Test and Trace</p> <p>As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent to identify close contacts.</p> <p>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>Schools may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases</p> <p>Management to liaise with public health and health and safety on RIDDOR reporting requirements associated with COVID 19 outbreaks. NOTE: - RIDDOR reports to be maintained for audit and inspection purposes.</p>	2	5	10
15.	Risk of ill health from COVID 19 outbreaks inadequate contingency planning	E, VP, C, P,	<p>Develop a contingency plan (outbreak management plans) outlining what the school will do if pupils or staff test positive for COVID-19, or how the school will if advised to take extra measures to help break chains of transmission.</p> <p>NOTE: -Schools should think about taking extra action if the number of positive cases substantially increases. Information on what circumstances might lead you to consider taking additional action, and the steps you should work through, can be found in the contingency framework.</p> <p>The contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings. Local authorities, directors of public health (DsPH) and PHE health protection teams (HPTs) can recommend measures</p>	2	5	10

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			described in the contingency framework in individual education and childcare settings – or a small cluster of settings – as part of their outbreak management responsibilities.			
16.	Risk of ill health from COVID 19 as a result of inadequate communication to staff and relevant others around required control measures	E, VP, C, P,	<p>Head teachers must ensure they introduce documented systems to communicate the requirements of COVID 19 risk assessments where staff are expected to work or visit.</p> <p>Head teachers ensure the information includes the control measures which have been implemented and premises specific instructions in order to help protect staff and others whilst in school premises</p> <p>Head teachers ensure that they inform all children, young people, parents, carers or any visitors, such as suppliers, not to enter the education or childcare setting if they are displaying any symptoms of coronavirus (following the COVID-19: guidance for households with possible coronavirus infection).</p> <p>Head teachers ensure that they inform all parents that if their child needs to be accompanied to the education or childcare setting, only one parent should attend.</p> <p>Signs and notices relating to COVID 19 risks and required precautions to be provided at strategic locations throughout the building.</p> <p>Head teachers ensure that they ensure parents and young people are aware of recommendations on transport to and from education or childcare setting (including avoiding peak times).</p> <p>Use of emails and the Intranet to cascade information as and when required in addition to risk assessment sign off sheets.</p>	2	5	10

Additional Control Measures Section

Use the section below to document additional control measures specific to the premises or activity being assessed.

Ref	Hazard Identification & Associated Risks	Who could be harmed? (E, SU, VP, V, P, C, ES)	Existing Control Measures	Residual Risk Rating		
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Action Register

This action register should be used to document any additional control measures which are required to eliminate or adequately control the risks identified within the assessment.

- Any risks which require additional control measures which cannot be implemented in a timely manner, must be documented within the action register.
- Consideration should be given to the hierarchy of controls when implementing control measures.
- Actions must be assigned to an action owner who is responsible for implementing the required action within the timescales indicated.
- Service Area Managers must escalate any significant risks which cannot be resolved locally to their Head of Service for resolution.
- Heads of Service must escalate any risks which cannot be resolved at Head of Service level to their Director for resolution.
- The action register must be updated once the actions have been completed and the control measures incorporated into the risk assessment.

Ref	Date Assigned	Action Required	Action Owner	Action Taken	Date Completed
1.	29.11.2021	New Government Guidance with Ref to Omnicron Variant	K Hall	<ul style="list-style-type: none"> • Masks to be worn in corridors and communal areas for all staff, visitors and pupils in Yr 7 and above who are not exempt • P Irwin e-mailed staff of changes and announcements made on tanoy on Mon 19th and Tues 30th Nov 21. • Christmas Performances and Christingle cancelled – Letter sent to parents Wed 1st Dec 21 	29.11.2021
2.	04.12.2022	New Government Guidance with Ref to Omnicron Variant	K Hall	Masks to be worn in secondary classrooms if not exempt	04.12.2022

Risk Assessment Authorisation & Review

Name of Assessor(s):		Signature of Assessor(s):		Date:	
Name of Authorising Manager:		Signature of Authorising Manager:		Date:	

- This risk assessment is a living document and must be reviewed regularly (at least annually) by the manager responsible for the activity being assessed. It should also be reviewed:
 - If there is reason to doubt the effectiveness of the assessment.
 - Following an accident or other significant incident which could impact upon the safety of employees or relevant others.
 - Following significant changes to the task, process, procedure, personnel or line management.
 - Following the introduction of vulnerable personnel.
- A copy of the updated risk assessment should be maintained and made available for inspection and audit purposes

Review	Name of Manager	Date	Comments
Review 1	K Hall	03.12.2021	Updated with new government guidance
Review 2	K Hall	04.01.2022	Updated with new government guidance and removal of reference to Clinically Extremely Vulnerable
Review 3			
Review 4			
Review 5			
Review 6			
Review 7			
Review 8			