



Living and Learning through Christ

St Bernadette Catholic Primary School

11 January 2022

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Part A: Background and Context

This risk assessment has been developed with reference to:

- Schools Covid-19 operational guidance (January 2022) [schools COVID-19 operational guidance \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/schools-covid-19-operational-guidance-january-2022.pdf).
- Actions for early years and childcare providers during the COVID-19 pandemic (July 2021) [Early years and childcare: coronavirus \(COVID-19\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/early-years-and-childcare-providers-during-the-covid-19-pandemic)
- SEND and specialist settings: additional COVID-19 operational guidance (6 July 2021- updated 2 December 2021) [SEND and specialist settings - additional operational guidance: COVID-19 \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/send-and-specialist-settings-additional-operational-guidance-covid-19.pdf)
- **Contingency Framework: Education and childcare settings** (August 2021 – updated 15 December 2021) [Contingency framework: education and childcare settings \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/contingency-framework-education-and-childcare-settings.pdf)



Rationale for guidance for schools from September 2021.

Government guidance has been developed on the premise that disruption to children and young people's education must be minimised. The Evidence summary: COVID-19 - children, young people and education settings - GOV.UK (www.gov.uk)OV.UK (WWW.GOV.UK) sets out the evidence relevant to, and in support of, the government's decision to revise the guidance on the COVID-19 safe working and protective measures that have been used within settings, colleges and early years settings in England during the pandemic.

In making this decision, the government has balanced education and public health considerations – weighing the impact of these measures on teaching, educational attainment, the health and wellbeing of children, pupils, students and staff and the functioning of schools, colleges and early years settings, against the COVID-19 risks in a context that has now fundamentally changed due to the success of the vaccination programme.

Contingency Planning

Government guidance requires settings to have an Outbreak Management Plan (sometimes called contingency plan) outlining how they would operate if any of the following circumstances applied to their setting or area:

- a COVID-19 outbreak within a setting
- if there is extremely high prevalence of COVID-19 in the community and other measures have failed to reduce transmission
- as part of a package of measures responding to a Variant of Concern (VoC)

This includes how we would ensure every child, pupil or student receives the quantity and quality of education and care to which they are normally entitled.

If necessary we will reinstate relevant control measures from our 2020-21 risk assessment to address the areas set out in

[Contingency framework: education and childcare settings - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Control Measures

This risk assessment addresses the essential control measures set out in the government guidance referred to above. They are as follows:

Settings should:

- 1. Ensure good hygiene for everyone.**
- 2. Maintain appropriate cleaning regimes.**
- 3. Keep occupied spaces well ventilated.**
- 4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.**

We have adapted this risk assessment in consultation with relevant partners including trade union representatives where available. This risk assessment will be made publicly available to those who wish to see it.

Part B

What is the Task/Activity or Environment you are assessing?	What Hazards are present or may be generated? (Use a row for each one identified)	Who is affected or exposed to hazards?	What Severity of Harm can reasonably be expected? (See Table 1)	What Precautions (Existing Controls) are already in place to either eliminate or reduce the risk of an accident happening?	What Likelihood is there of an accident occurring? (See Table 1)	What is the Risk Rating ? (See Table 2 and 3)
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1: ENSURE GOOD HYGIENE FOR EVERYONE

Hand hygiene	Poor hand hygiene increases the likelihood of infection from coronavirus	Pupils and staff	Serious	Opportunities are provided for staff and pupils to clean their hands with soap and water and dry thoroughly: • on arrival at setting • after using the toilet • after breaks and sporting activities • before food preparation • before eating any food, including snacks • before leaving setting • after sneezing/coughing. Covered bins available for disposal of paper towels will be emptied periodically during the day. Signage about how to wash hands properly, is on display and reinforced with pupils. Where sinks are not easily accessible hand sanitiser will be available. Supervision by staff is provided as needed.		
Respiratory Hygiene	Poor respiratory hygiene increases the likelihood of infection from exposure to coronavirus.	Pupils and staff	Serious	Catch it, kill it, Bin it – tissues are available in all classrooms, staffroom and reception at a minimum. The message is reinforced with pupils. Covered bins are available for the disposal of used tissues.		

2. MAINTAIN APPROPRIATE CLEANING REGIMES

Cleaning	Person contracts COVID 19 as a result of inadequate cleaning	Pupils and staff	Serious	Our cleaning specification has been reviewed to ensure we comply with requirements set out in https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings Where our own cleaners and/or additional staff are required to undertake cleaning duties we have ensured that they have received appropriate training and are provided with PPE, as set out in guidelines above, (note 1). This also applies to other staff who may be asked to carry out cleaning duties during this period. We have identified cleaning of high-risk areas to be undertaken throughout the setting day to include: • Door handles • Kettles • Taps • Switches • Phones • Laptops / • Printers and photocopiers • Staffroom/ food preparation • Surfaces that pupils are touching e.g.: toys, books, chairs, tables, doors, sinks, toilets, bannisters, light switches, etc. As a minimum, frequently touched surfaces will be wiped down twice a day, and one of these should be at the beginning or the end of the working day. Cleaning will be more frequent depending on the number of people using the space, whether they are entering and exiting the setting and access to handwashing and hand-sanitising facilities. Cleaning of frequently touched surfaces is particularly important in bathrooms and communal kitchens. This action has been shared with relevant staff.			
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Safe use of cleaning products	Inappropriate exposure to cleaning product results in allergic reaction/ poisoning etc Storage arrangements of cleaning product change increasing potential for unauthorised 'use' by pupils.	Pupils and staff	Serious	All staff involved in cleaning duties will receive training re: safe use and storage of cleaning materials. PPE will be provided for all cleaning activities. Safety data sheets for cleaning products are available. Only recommended cleaning products are used.		
	Use of hand sanitiser: potential for improper use and ingestion.	Pupils and staff	Serious	We are providing/allowing the use of hand sanitisers that contain at least 60% alcohol. Staff supervision provided as required We have obtained the Safety Data Sheet for the product(s) They advise on action to be followed if the sanitiser is not used as designed i.e., a child drinks some; it gets in eyes etc. This will also help with potential reactions to the product. We have and will secure adequate supplies of the product and provide it, especially in areas such as reception to the building(s).		
3. KEEP OCCUPIED SPACES WELL VENTILATED						
Ventilation (Open windows and doors are recommended as a means of improving air circulation within the building)	Falls from height (open windows)	All premises occupants	Serious	Whilst taking into consideration the necessity to increase ventilation by improving air circulation within the building we have advised staff that window opening restrictors must not be removed.		
	Additional doors and windows are left open compromising site security/fire safety.	All premises occupants	Serious	We have reviewed our site and identified doors that could remain open without compromising fire safety/ and or security. Here, for high-risk areas such as kitchens and boiler rooms fire doors will be kept in the closed position. Lower risk rooms such as classrooms and offices may be propped open with removable things - a weight or		

				wedge - if there are people present who will be tasked with removing it if the alarm goes off and at the end of the day. Door guards etc, will continue to be used to improve circulation in the building (and also reduce the need for touching the door handles).		
	Inadequate ventilation contributes towards the spread of coronavirus. Open windows in the winter months mean that the temperature in buildings is uncomfortable.	All premises occupants	Serious	We will ensure that our building is heated to a temperature whereby staff and pupils can work comfortably whilst endeavouring to ensure that there are measures in place to ensure good ventilation. This will be achieved by a variety of measures including: - mechanical ventilation systems – these will be adjusted to increase the ventilation rate wherever possible, and checked to confirm that normal operation meets current guidance (if possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply). - natural ventilation – opening windows (in cooler weather windows will be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air - natural ventilation – if necessary external opening doors may also be used (as long as		

				they are not fire doors and where safe to do so) The following advice from HSE: https://www.hse.gov.uk/temperature/thermal/managers.htm https://www.cibse.org/coronavirus-covid-19/coronavirus-sars-cov-2-covid-19-and-hvac-systems NB: Minimum workplace temperature is 16 degrees centigrade. To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures will also be used as appropriate: • opening high level windows in preference to low level to reduce draughts • increasing the ventilation while spaces are unoccupied (e.g., between classes, during break and lunch, when a room is unused) • providing flexibility to allow additional, suitable indoor clothing. Including advising staff and pupils re: the value of layering clothing. • rearranging furniture where possible to avoid direct drafts		
Ventilation – Use of CO2 monitor	Poor positioning of CO2 monitor gives inaccurate or misleading readings	All premises occupants	Serious	CO2 levels vary within an indoor space. It's best to place CO2 monitors at head height and away from windows, doors, or air supply openings. Monitors should also be positioned at least 50cm away from people as their exhaled breath contains		

				CO2. If monitors are too close, they may give a misleadingly high reading. Measurements within a space can vary during the day due to changes in numbers of occupants, activities, or ventilation rates. Doors and windows being open or closed can also have an effect. The amount of CO2 in the air is measured in parts per million (ppm). If our measurements in an occupied space seem very low (far below 400ppm) or very high (over 1500ppm), it's possible our monitor is in the wrong location. We will move it to another location in the space to get a more accurate reading. Instantaneous or 'snapshot' CO2 readings can be misleading. We will take several measurements throughout the day frequently enough to represent changes in use of the room or space. Then calculate an average value for the occupied period. We note the need to repeat monitoring at different times of the year as outdoor temperatures change and this will affect worker behaviour relating to opening windows and doors when your space relies on natural ventilation. Our readings will help us decide if a space is adequately ventilated. Identifying poorly ventilated areas by using CO2 monitors (hse.gov.uk)		
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4. FOLLOW PUBLIC HEALTH ADVICE ON TESTING, SELF ISOLATION AND MANAGING CONFIRMED CASES OF COVID-19

Engagement with the NHS Test and Trace Process. Access to testing	Failure to follow PHE/ NHS Test and Trace procedures increases the likelihood of exposure to coronavirus in the setting community.	Pupils and staff	Medium	Close contacts in schools are now identified by NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. 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. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case 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. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. Staff signposting to their local Public Health England health protection team. Where necessary we will direct members of the setting community with symptoms of coronavirus to Get a free PCR test to check if you have coronavirus (COVID-19) - GOV.UK (www.gov.uk) https://www.gov.uk/government/publications/coronavirus-covid-19-home-test-kits-for-settings-and-fe-providers/coronavirus-covid-19-home-test-kits-for-settings-and-fe-providers We will ask parents and staff to inform us immediately of the results of a PCR test.		
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Contact with infected persons/ exposure to the virus within the setting.	Person contracts coronavirus as a result of direct contact with an infected person (or a symptomatic person) entering the premises.	Pupils and staff	Serious	Guidance has been issued to the entire school community. If anyone in the setting 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 stay at home and get a PCR test. For more information - DfE GUIDANCE from December 2021: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1040827/Schools_COVID-19_operational_guidance Those not fully vaccinated will still need to isolate if they are contacts, and everyone will still have to isolate if they test positive, to protect themselves and others. (refer to the most recent operational guidance below)		
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Since Wednesday 22 December, the 10 day self-isolation period for people who record a positive PCR test result for COVID-19 has been reduced to 7 days in most circumstances, unless you cannot test for any reason.

Individuals may now take LFD tests on day 6 and day 7 of their self-isolation period. Those who receive two negative test results are no longer required to complete 10 full days of self-isolation. The first test must be taken no earlier than day 6 of the self-isolation period and tests must be taken 24 hours apart. This also applies to children under 5, with LFD testing at parental or guardian discretion. If both these test results are negative, and you do not have a high temperature, you may end your self-isolation after the second negative test result and return to your education setting from day 8.

December 2021 DfE Operational Guidance update:

Close contacts in schools are now identified by NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. From 14 December 2021, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to take a LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result. Daily testing of close contacts applies to all contacts who are:

- fully vaccinated adults – people who have had 2 doses of an approved vaccine*



- all children and young people aged 5 to 18 years and 6 months, regardless of their vaccination status
- people who are not able to get vaccinated for medical reasons
- people taking part, or have taken part, in an approved clinical trial for a COVID-19 vaccine Children under 5 years are exempt from self-isolation and do not need to take part in daily testing of close contacts.

	Contact with those developing symptoms of the virus during the working day.	Pupils and staff	Serious	If anyone in our setting develops COVID-19 symptoms, however mild, they will be sent home and advised to get a PCR test and follow public health advice. When to self-isolate and what to do - Coronavirus (COVID-19) - NHS (www.nhs.uk) Most recent guidance re: What to do if a pupil is displaying signs of coronavirus has been shared with relevant staff and is on display. If a child is awaiting collection, they will be moved, via a route involving the shortest possible internal distance (i.e., including an outside route where possible) if possible, to the isolation area in the entrance hall ensuring a distance of at least 2 meters away from other people. If the isolation area is unusable then the Headteacher's office should be used with appropriate adult supervision. The office exit door will be used by parents to collect the child. If they need to go to the bathroom while waiting to be collected, the disabled toilet by the offices will be for their use. The bathroom will be cleaned and disinfected using standard cleaning products before being used by anyone else. PPE will be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be		
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				maintained (such as for a very young child or a child with complex needs). In an emergency we will call 999 if they are seriously ill or injured or their life is at risk. Staff are instructed to wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. We will clean the affected area with normal household disinfectant after someone with symptoms has left to reduce the risk of passing the infection on to other people. See https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings		
Lateral Flow Testing (Asymptomatic testing)	Non participation in Lateral Flow Testing means that asymptomatic cases are undetected within the setting community.	Pupils and staff	Serious	Regular rapid coronavirus (COVID-19) tests if you do not have symptoms - NHS (www.nhs.uk) Even if someone has tested positive for COVID-19 within the last 90 days, they are strongly encouraged to take part in LFD testing on-site through ATS or at home once they have completed their isolation period for their prior infection. Our setting workforce (including regular contractors and visitors) have been provided with sufficient testing kits to participate in lateral flow testing at least twice a week at home. We will ask parents and other visitors to take a lateral flow device (LFT) test before entering the school.		

				Confirmatory PCR tests – January update We will follow the latest government guidance on confirmatory PCR tests in Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk) following a positive lateral flow test. We note that from Tuesday 11 January 2022 anyone in England who receives a positive lateral flow device (LFD) test result should report their result on Report a COVID-19 rapid lateral flow test result - GOV.UK (www.gov.uk) and must self-isolate immediately, but will not need to take a follow-up PCR test. After reporting a positive LFD test result, they will be contacted by NHS Test and Trace so that their contacts can be traced. Anyone who tests positive will be able to leave self-isolation seven days after the date of their initial positive test if they receive two negative lateral flow test results, 24 hours apart, on days six and seven.		
	Lateral Flow Testing process is not implemented correctly leading to inaccurate results and/or inadequate follow up of positive test results	Pupils and staff	Serious	Staff or pupils with a positive LFD test result must self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result. 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 member of staff or pupil can return to setting.		
Management of confirmed	Failure to follow PHE/ NHS Track and Trace procedures increases the likelihood of exposure to	Pupils and staff	Serious	When an individual develops COVID-19 symptoms or has a positive test Pupils, staff and other adults should follow public health advice on when to self-isolate		



cases of coronavirus	coronavirus in the setting community. Anxiety and dissent within the setting community.			and what to do. They should not come into school if they have symptoms, 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). If anyone in our school develops COVID-19 symptoms, however mild, they will be sent home and they should follow public health advice. DfE update - close contacts of those testing positive with coronavirus will be identified via NHS Test and Trace. School may be contacted in exceptional cases to identify close contacts. Records will be kept of all visitors with sufficient detail to support rapid contact tracing if required by NHS Test & Trace. December 2021 Update: <i>Schools are strongly encouraged to ask parents and other visitors to take a lateral flow device (LFD) test before entering the school.</i> We note 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: • 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or		
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				• 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period. We will work with our local health protection team who will be able to advise if additional action is required for increasing numbers. We will seek public health advice if a pupil or staff member is admitted to hospital with COVID-19. Hospitalisation could indicate increased severity of illness or a new variant of concern. Alternatively, we will call the Department for Education's existing coronavirus (COVID-19) helpline number on 0800 046 8687, and select option 1 Where applicable we will advise temporary staff of their entitlement to <u>Test and Trace Support Payments</u>, noting that this support is only for the temporary staff who settings decide not to engage in home working and who are not being paid during self-isolation. To be eligible for a Test and Trace Support Payment, the individual must be living in England, meet the eligibility criteria and be formally advised to self-isolate by NHS Test and Trace, who will provide the individual with an NHS Test and Trace Account ID. We will also extend this advice to parents/ carers of children who have been asked to self-isolate as they may be applicable for this payment in some cases. Claiming financial support under the Test and Trace Support Payment scheme - GOV.UK (www.gov.uk)		
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Track and Trace	December 2021 Update		Medium	Close contacts in schools are now identified by NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. 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. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case 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. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.		
Containing any local outbreak	Disruption to pupils' education	Pupils and staff	Serious	We have developed a Contingency Plan to ensure that the education of affected groups of pupils is maintained in the event of increased restrictions or closure. This will include the provision of remote learning.		
	Parents/carers of a child with symptoms of coronavirus refuse to keep them at home.	Pupils and staff	Serious	Government guidance: If a parent or carer of a pupil with coronavirus or with a suspected case of coronavirus insists on their child attending the setting, we will take the decision to refuse the pupil if, in our reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Our decision will be carefully considered in light of all the circumstances and current public health advice'.		



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	Notification to Ofsted (Early Years and childcare settings ONLY)			We note that any confirmed cases of coronavirus in the setting (child or staff member) and, if the setting has been advised to close as a result should be 'swiftly' reported to Ofsted through the usual notification channels.		
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5. USE OF FACE COVERINGS

	Failure to use face covering in areas where it is difficult to maintain social distancing increases the likelihood of exposure to coronavirus in the setting community.	Pupils and staff	Serious	From January 2022: In early years settings, we recommend that face coverings should be worn by staff and adult visitors when moving around in corridors and communal areas. Children in early years settings do not need to wear a face covering. In primary schools, we recommend 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 should not be asked to wear face covering." Parents/visitors are required to wear face masks when on school property. This approach has been explained to parents/ carers in newsletters, via text message and is clearly signposted within the school grounds. In cases of non-compliance the member of SLT on duty will remind those not wearing masks of the requirement to do so. In the case of continued non-compliance this will be followed up by a letter reiterating our approach.		
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				Further non-compliance will lead to the headteacher sending a Final Warning Letter As a last resort the headteacher and in the case of further non-cooperation, in consultation with the MAT/LA, will consider the potential of approaching DS and activating the 'Landlord Right' to warn the parent/carer and then, if necessary, proportionately ban them from the school site, backed by potential criminal sanction under section 547 of the Education Act 1996. We have advised staff that face visors or shields should not routinely be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in preventing aerosol transmission, and therefore in a school environment are unlikely to offer appropriate protection to the wearer.		
Use of transparent face coverings	Discomfort from use of transparent face coverings. Reduced likelihood of containment of virus transmission	Pupils, Staff and Visitors	Serious	We note guidance as follows: Transparent face coverings can be worn to assist communication with someone who relies on: • lip reading • clear sound • facial expression Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. The benefits of transparent face coverings should be considered alongside the comfort and breathability of a face covering that contains plastic, which may		

				mean that the face covering is less breathable than layers of cloth. Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles. 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 may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately		
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6. USE OF PERSONAL PROTECTIVE EQUIPMENT (PPE) (A face covering is not PPE because they are not designed to protect the wearer from infection from coronavirus).

Use of Personal Protective Equipment (PPE)	Incorrect use exacerbates the risk of further infection. <i>December 2021 Updated Operational Guidance</i>	Pupils and staff	Serious	Use of personal protective equipment (PPE) Most staff in schools will not require PPE beyond what they would normally need for their work, (face masks, ventilation, hygiene regime).		
Use of Personal Protective Equipment (PPE) in	Incorrect use exacerbates the risk of further infection.	Pupils and staff	Serious	Increased likelihood that staff will be exposed to bodily fluids in the course of their work will mean that the use of PPE will be risk assessed and relevant equipment provided where applicable.		

Special settings				The following link is used as our guidance at present: SEND and specialist settings - additional operational guidance: COVID-19 (publishing.service.gov.uk) PPE is only needed in a very small number of cases including: • children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way • if a child, young person or other learner becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn"		
7: SETTING WORKFORCE						
Staff wellbeing	Staff anxiety re: potential exposure to the virus.	All staff	Serious	Where necessary Individual discussions are held with staff to identify concerns. (NB: recognising that some could be experiencing bereavement, mental health issues, etc.).		



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				We have signposted to relevant counselling services. Including the Education Support Partnership which provides a free helpline for setting staff and targeted support for mental health and wellbeing. HR advice is available if required. Liaison with the trade unions. https://www.hse.gov.uk/news/assets/docs/talking-with-your-workers		
Staff training (including induction for supply teachers and other visiting staff).	Staff are not aware or do not understand the requirements for working safely.	All staff	Serious	Staff are kept up to date with all changes to protocols and DFE operational guidance. The risk assessment is updated regularly and shared with staff and includes: • What to do if they suspect that they or a member of their household has coronavirus (including testing arrangements) • Day to day organisations and procedures including arrangements for cleaning, • Procedures to follow if they suspect that a child in their group is displaying coronavirus symptoms • Site security and fire safety including evacuation and lockdown procedures. Use of PPE (where applicable).		



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Individual staff requirements	Concerns from staff in identified work groups	Clinically extremely vulnerable	Medium	Those formerly considered to be clinically extremely vulnerable (December 2021 Operational Guidance update): <i>Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higher-risk are not being advised to shield again. Children and young people who were previously identified as being in one of these groups, are advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread.</i> Government's 'Plan B' arrangements from 13 December recommend that office workers who can work from home should do so. Here, anyone who cannot work from home, such as those involved in the face-to-face provision of education, should continue to go to their place of work. Guidance for schools states that 'School leaders are best placed to determine the workforce required to meet the needs of their pupils. School leaders will need to consider whether it is possible for specific staff undertaking certain roles to work from home without disrupting to face-to-face education.'		
	Concerns from staff in identified work groups	Pregnant women	Medium	We will follow the Coronavirus (COVID-19): advice for pregnant employees - GOV.UK (www.gov.uk)		

				Further guidance and advice on coronavirus (COVID-19) and pregnancy from the Royal College of Gynaecologists .		
Use of volunteers	Potential for the introduction of coronavirus into the setting	Pupils & Staff	Serious	Volunteers may be used to support the work of the setting, as would usually be the case. All volunteers will be expected to follow our control measures to reduce the spread of coronavirus.		
8: PUPIL WELLBEING						
Management of expectations within the setting community	Anxiety within the setting's community re: prevalence and effectiveness of infection control measures.	All members of the setting community	Serious	Regular communication with all stakeholders to ensure they are aware of DFE updates, NHS guidelines, Risk assessment updates, contingency plan. Government guidance for parents is available at: What parents and carers need to know about early years providers, settings and colleges - GOV.UK (www.gov.uk)		
Individual pupil medical requirements	Increased likelihood of serious illness resulting from exposure to coronavirus.	Extremely clinically vulnerable pupils (shielded)	Medium	All CEV pupils should attend their setting unless they are one of the very small number of pupils under paediatric or other specialist care and have been advised by their GP or clinician not to attend. Where a pupil is unable to attend our setting because they are complying with clinical or public health advice, we will immediately offer them access to remote education. settings should keep a record of, and monitor engagement with this activity but this does not need to be formally recorded in the attendance register.		



				Where children are not able to attend our setting as parents are following clinical and/or public health advice, absence will not be penalised.		
9: PROVISION OF FIRST AID AND ADMINISTRATION OF MEDICATION						
Provision of first aid	Inadequate first aid treatment exacerbates injury or pre-existing conditions.	Pupils and staff	Serious	Control measures to ensure that suitably qualified staff are available at all times. We will ensure a member of staff with a full PFA certificate is on site at all times when children are present, as set out in the EYFS.		
Administration of medication	Illness or injury to those who are unable to access their medication	Pupils and staff	Fatal/ major	Setting procedures for the administration of prescription and controlled medication will continue to apply.		
10: LETTINGS						
Lettings	Setting control measures re: cleaning etc are compromised leading to increased risk of infection, expense and possible reputational damage.	Pupils Staff Wider community	Serious	We will ensure that all users of our premises adhere to the control measures set out in this risk assessment. This will include ensuring that effective cleaning is maintained and additional ventilation measures do not compromise site security. Where opening up setting leisure facilities for external use, we will do so in line with government guidance.		
11: EDUCATIONAL VISITS						
Educational visits	Exposure to infection from inadequate Covid cautions.	Pupils and staff	Serious	We will undertake full and thorough risk assessments in relation to all educational visits to ensure they can be undertaken safely. As part of this risk assessment, we will consider what control measures need to be used to reduce the risk of exposure to coronavirus and		



				follow wider advice on visiting indoor and outdoor venues. OEAP National Guidance will be followed (see Contents (oeapng.info)) From September 2021 any international visits that have previously been deferred or postponed may take place subject to wider international travel restrictions. (RPA members have been advised that booking any new overseas visit before September 2021 will be at their own risk.)		
12: SETTING RECEPTION AREAS						
Setting Reception areas	Exposure to infection from visitors.	Pupils and staff		Signage has been erected to advice visitors of hygiene protocols. Signing in arrangements - sanitiser available to clean hands after use. Hand sanitiser will be provided to all persons entering premises with signage to explain control measures etc. Masks to be worn by all visitors to the site. Face shield to be worn by visitors exempt from wearing a mask. Parents/visitors will be asked to take a LFT.		
	Violence and aggression towards setting staff causes injury and distress	Pupils and staff	Serious	We will maintain transparency and regular contact with all members of the setting community. Regular briefings/updates for all staff so that they are aware of setting response to the COVID 19 virus and can communicate consistently to those who ask.		



				Readiness to deploy the range of behaviour remedies if behaviour becomes unacceptable from warning to full banning from site/sect 547 warnings/action.		
13: AFTERSCHOOL AND BREAKFAST CLUBS						
Afterwards and Breakfast Clubs	Arrangements for infection control are not practised at Breakfast and Afterwards Club thus increasing the risk of infection within the setting community.	All members of the setting community	Serious	Updated guidance for operating may be found as follows: OOS OMICRON GUIDANCE December 1412 (publishing.service.gov.uk) OOSS OMICRON GUIDANCE December 1412 (publishing.service.gov.uk) <u>Where setting is the provider:</u> Control measures re: hygiene, cleaning, ventilation etc. set out above will be followed. <u>If an external provider is used on setting premises:</u> We will liaise with the external provider to ensure that they are aware of the control measures set out in our risk assessment and guidance above. We will support them in matching or exceeding the expectations set out within it.		
14: SCHOOL PERFORMANCES						
School Performances	Exposure to and increased opportunity for transmission of coronavirus within the school community.	All members of school community	Serious	Performances in schools can take place in front of live audiences, subject to Covid-secure measures being in place. See the Government's guidance on performing arts for more advice.		

				<u>Events and attractions - Working safely during coronavirus (COVID-19) - Guidance - GOV.UK (www.gov.uk)</u> In deciding whether to admit parents/ carers to a school performance we will: • Consider holding the performance outside • Ask parents/carers to carry out a Lateral Flow Test at home prior to attending and/or produce a 'COVID Passport' (if relevant attendance thresholds are met - see below). • Limit numbers and space out seating. • Ask the audience to wear face coverings. • Ensure the performance space is well ventilated. Mandatory certification Schools are not required to use the NHS COVID Pass, unless they are holding a specific event (such as a reception, concert or party) that meets the attendance thresholds. Where applicable, schools should follow guidance on mandatory certification for events. Under 18s are exempt from showing their COVID Status but should be counted towards attendance thresholds. You should not use the NHS COVID Pass as a condition of entry for education or related activities such as exams, teaching, extra-curricular activities or any other day-to-day activities that are part of education or training.		
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				<u>Using your NHS COVID Pass for travel abroad and at venues and settings in England - GOV.UK</u> <u>(www.gov.uk)</u>		
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December 2021 Government Guidelines: What has changed

The self-isolation advice for people with coronavirus (COVID-19) has changed. It is now possible to end self-isolation after 7 days, following 2 negative LFD tests taken 24 hours apart. The first LFD test should not be taken before the sixth day.



Living and Learning through Christ



If you have COVID-19 [symptoms](#) you should stay at home and self-isolate immediately. You should [arrange to have a PCR test](#) as soon as possible. If this PCR test result is positive, you must continue to self-isolate.

If you do not have COVID-19 symptoms, but you have a positive PCR test result, you must stay at home and self-isolate.

If you live in the same household as someone with COVID-19 you are at significantly higher risk of becoming infected yourself.

If you have been vaccinated with a COVID-19 vaccine, you are less likely to become severely ill if you catch COVID-19. You are also less likely to spread COVID-19 to other people, but it is still possible for this to happen. Therefore:

- if you are aged 18 years 6 months or over and you are not fully vaccinated*, and you live in the same household as someone with COVID-19, you are legally required to stay at home and self-isolate
- if you are fully vaccinated or aged under 18 years and 6 months, and you live in the same household as someone with COVID-19, you are not legally required to self-isolate. However, you are strongly advised to take an LFD test every day for 7 days, and to self-isolate if any of these test results is positive

*You are fully vaccinated 14 days after having received 2 doses of an approved vaccine (such as Pfizer/BioNTech, AstraZeneca or Moderna/Spikevax) or one dose of the single-dose Janssen vaccine.

LFD tests are very good at identifying people who have high levels of coronavirus and are most likely to pass on infection to others, even if you do not have symptoms.

Since Wednesday 22 December, the 10 day self-isolation period for people who record a positive PCR test result for COVID-19 has been reduced to 7 days in most circumstances, unless you cannot test for any reason.

Individuals may now take LFD tests on day 6 and day 7 of their self-isolation period. Those who receive two negative test results are no longer required to complete 10 full days of self-isolation. The first test must be taken no earlier than day 6 of the self-isolation period and tests must be taken 24 hours apart. This also applies to children under 5, with LFD testing at parental or guardian discretion. If both these test results are negative, and you do not have a high temperature, you may end your self-isolation after the second negative test result and return to your education setting from day 8.