

CORPORATE HEALTH & SAFETY SERVICES: **CORPORATE RISK ASSESSMENT – RETURN TO WORK COVID-19 SECURE LBTH**

Education settings must be able to achieve the following controls as defined by the Department of Education before opening the school to the full opening in September. The Risk Assessment must be reviewed by Head Teachers point by point and where actions are implemented, they must be reworded if necessary to show how the controls have been applied, add/amend for your school environment. The risk assessment should be reviewed at SLT and with the Governing Body. The risk rating for each identified hazard and overall risk assessment must be considered and decided/changed to Low, Medium, or High by the school on how the school proceeds with the control measures and the wider opening of the school.

The current Government guidance for detailed review to assist in your risk assessment link is <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

Description of Activity	COVID 19 Secure Educational Settings Preparing for Full Opening of School		
Location	St Paul's Whitechapel CE Primary School		
Completed by	Corporate Health and Safety Services (CHSS) draft template for school risk review and planning		
Date of Assessment	23 rd August 2020	Review Date	On-going*

Level of Risk	Suggested Action
LOW	Control measures are adequate but continue to monitor and review; ensure that they remain satisfactory and appropriate
MEDIUM	Control measures need to be introduced within a specified time period; continue to monitor and review
HIGH	Unless control measures can be immediately introduced to reduce the risk so far as is reasonably practicable, the task or activity should be suspended
Overall Residual Risk for Activity (L / M / H):	
MEDIUM	

Glossary

AHT	Assistant headteacher	EHT	Executive headteacher	SchCk	School Cook
AIR	Accident incident report	FBM	Federation business manager	SENCo	Special needs co-ordinator
CHSS	Corporate H & S Section	HHP	Hand hygiene protocol	SIB	Staff information booklet
CRT	Covid-19 Response Team:-	HSE	Health & Safety Executive	SOA	Senior Office Administrator
	StJ: EHoS; DHT; SENCo; SBM; PM	PLP	Parent liaison partner	SPM	Place2Be school project manager
	StP: EHT; DHT; SENCo; SAO; CT	PM	Premises manager (St John's)		
CT	Caretaker (St Paul's)	PrTm	Premises team:-		
DHT	Deputy headteacher		St John's: SBM; PM		
DL	Duty leader		St Paul's: SAO; CT		
EHoS	Executive head of school	RA	Risk assessment		
		SLT	Senior leadership team		

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PREVENTION						
What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
1. Minimise contact People unwell/ Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Minimise contact with staff, pupils, visitors who are unwell with Covid-19, showing symptoms, or have tested positive in last 7 days, by sharing of communications, instructions, advice to staff, pupils, parents on what the symptoms are and actions required 2 Anyone presenting Covid-19 symptoms at school will be sent home as soon as possible, if a pupil is awaiting collection they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people. If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else. 3 PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) guidance. 4 Awareness, communication of symptoms of Covid-19, which is a new continuous cough or a high temperature, or has a loss of or change in their normal sense of taste or smell – they must be sent home and advised to follow ' stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection ', which sets out that they must self-isolate for at least 7 days and should arrange to have a test to see if they have coronavirus (COVID-19). Other members of their household (including any siblings) should self-isolate for 14 days from when the symptomatic person first had symptoms. 5 Any staff that have been in close contact with someone with Covid-19 symptoms do not need to self-isolate/ go home unless have symptoms	MED	Communicate with stakeholders (staff, pupils, parents/ carers, governors and wider community) to raise awareness of the issues and explain school's measures including this risk assessment. Allocate dedicated room in the event of potential covid-19 concern/waiting room for parents to collect pupil Provide a small amount of PPE for staff unable to social distance to at least 2m whilst dealing with pupils presenting covid-19 symptoms.	EHT/ EHoS CRT PrTm	1/9 26/8 1/9

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2. Hand hygiene Coronavirus (COVID-19) (CV19) Poor Hand hygiene	Employees, agency, pupils, visitors	1 Clean hands more often than usual is the schools control measure, for staff, pupils, visitors, soap and running water is available throughout the school, this is supported with hand sanitation stations	MED	Communicate to stakeholders (see Communication strategy)	EHT/ EHoS	1/9
	Causing severe infection/disease	2 This is supported with communication plan that includes when to wash your hands, including when arriving into the school, returning from breaks, when changing rooms, before and after eating		Discuss hand hygiene protocol Communicate to stakeholders (see Communication strategy)	CRT EHT/ EHoS	26/8 1/9
		3 An assessment is being completed for the full return of school and how the hand hygiene procedures are going to be practically implemented, what areas/toilets can be used, at what time, to ensure this doesn't become a crowding concern these areas will be supervised, supported with mobile hand sanitising stations where needed as part of the assessment		Discuss toilet arrangements Communicate to stakeholders (see Communication strategy)	CRT EHT/ EHoS	1/9 26/8
		4 Signage installed throughout, education teaching resources used to train pupils and staff how to clean hands properly		Produce and place signage	PrTm	1/9
		5 Monitoring and cleaning of toilets, increasing the cleaning regime in place, including touch points, and removal of waste on a more regular basis		Monitor toilet cleaning	PrTm	1/9
		6 Resources have been increased for the additional supply of cleaning products, supported with a cleaning schedule pack that details what is required, the supplier, when to reorder to prevent supplies not running out		Check that sufficient resources acquired	PrTm	1/9
		7 Repeated communications and campaigns on this very important control measures		See Communication strategy	EHT/ EHoS	1/9
		8 COSHH risk assessment updated to ensure storage and use of chemicals are assessed with appropriate control measures, this includes the strict assessment and control measures of hand sanitiser being used and located around the school, with hand and soap preferred, but assessed to ensure the risk of ingestion and skin concerns using hand sanitiser is assessed		Ensure COSHH RA updated	PrTm	26/8/
		9 Promoting the hand cleaning if touching your face		See Communication strategy	EHT/ EHoS	1/9
		10 Reviewing the easiness of access to hand washing for pupils, staff, visitors		Discuss hand hygiene protocol	CRT	8/8
		11 Change behaviour promotion of implementing this control measure, aware of the break of pupils and staff not being in the school for a while and they may not have been washing their hands at home, now the school is creating a 'behaviour change' of a very important control measure		See Communication strategy	EHT/ EHoS	1/9

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		<p>12 For the younger children and for those children who may need support on this must be detailed here, and how you implement this</p> <p>13 To clean your hands, you should wash your hands thoroughly for 20 seconds with running water and soap and dry them thoroughly, although hand soap and running water is much preferred in schools wherever possible this is supported under strict risk control measures with mobile hand sanitising stations, ensuring that all parts of the hands are covered.</p>		<p>See Communication strategy</p> <p>Include in hand hygiene protocol</p> <p>Disseminate to stakeholders</p>	<p>EHT/ EHoS</p> <p>CRT</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>26/8</p> <p>1/9</p>
<p>3.Respiratory hygiene</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Training, awareness, communication planning to promote this vital control measure in place</p> <p>2 Supported by signage</p> <p>3 Educational resources used as ongoing 'change behaviour' and importance of 'catch it, bin it, kill it'</p> <p>4 Assessment completed on resources required, including tissues/bins, waste supplies, and locations of increased tissue stations to ensure easy access to tissues throughout school</p> <p>5 Washing of hands after use of tissues, coughing, sneezing</p> <p>6 Supporting and assisting younger children and other pupils who may need assistance in understanding respiratory hygiene, or pupils with complex needs that cannot maintain respiratory hygiene should be detailed here</p> <p>7 Awareness to staff who are anxious about the need for face coverings indoors, the current (09/07/2020) guidance is:</p> <p>'Public Health England does not (based on current evidence) recommend the use of face coverings in schools. This evidence will be kept under review. They are not required in schools as pupils and staff are mixing in consistent groups, and because misuse may inadvertently increase the risk of transmission. There may also be negative effects on communication and thus education. Face coverings are required at all times on public transport (for children over the age of 11) or when attending a hospital as a visitor or outpatient.'</p>	LOW	<p>See Communication strategy</p> <p>Produce and place signage</p> <p>Communicate to stakeholders (see Communication strategy)</p> <p>Ensure adequate resources</p> <p>Communicate to stakeholders (see Communication strategy)</p> <p>See Communication strategy</p> <p>Communicate to stakeholders (see Communication strategy)</p>	<p>EHT/ EHoS</p> <p>PrTm</p> <p>EHT/ EHoS</p> <p>PrTm</p> <p>EHT/ EHoS</p> <p>EHT/ EHoS</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>26/8</p> <p>1/9</p> <p>1/9</p> <p>1/9</p> <p>1/9</p> <p>1/9</p>
<p>4.Cleaning regime</p> <p>Coronavirus (COVID-19) (CV19)</p>	<p>Employees, agency, Pupils, visitors</p>	<p>1 Cleaning schedule in place that ensures cleaning is generally enhanced and includes:</p> <ul style="list-style-type: none"> more frequent cleaning of rooms / shared areas that are used by different groups frequently touched surfaces being cleaned more often than normal detailed listing of areas being cleaned, by whom whether this is external resource or internal or mixture of both 	MED	<p>Review cleaning schedule</p>	<p>CRT</p>	<p>26/8</p>

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Someone entering the school/workplace/offices with CV19 and there is poor cleaning standards	Causing severe infection/disease	<ul style="list-style-type: none"> Areas that are shared between groups such as halls, canteens, corridors, toilets, need to be assessed and part of the enhanced cleaning regime <p>2 Different groups don't need to be allocated their own toilet blocks, but toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet</p> <p>3 Outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers. It is still recommended that pupils limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery and mobile phones. Bags are allowed. Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided, especially where this does not contribute to pupil education and development. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.</p> <p>Note: PHE will publish new revised guidance for cleaning non-healthcare settings. Current standards for cleaning; Covid-19-decontamination-in-non-healthcare-settings</p>		<p>Discuss toilet arrangements. Communicate to stakeholders (see Communication strategy)</p> <p>Discuss use of indoor/ outdoor equipment. Communicate to stakeholders (see Communication strategy)</p>	<p>CRT EHT/ EHoS</p> <p>CRT EHT/ EHoS</p>	<p>26/8 1/9</p> <p>26/8 1/9</p>
<p>5.Minimise contact social distancing</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19 coming close to others, poor social distancing, mixing of groups, lack of infection control separation</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 School has completed a full assessment to minimise contacts and mixing between people reduces transmission of coronavirus (COVID-19). For children old enough, they should also be supported to maintain distance and not touch staff and their peers where possible. This will not be possible for the youngest children and some children with complex needs and it is not feasible in some schools where space does not allow. Schools doing this where they can, and even doing this some of the time, will help. When staff or children cannot maintain distancing, particularly with younger children in primary schools, the risk can also be reduced by keeping pupils in the smaller, class-sized groups described above. Schools should make small adaptations to the classroom to support distancing where possible. That should include seating pupils side by side and facing forwards, rather than face to face or side on, and might include moving unnecessary furniture out of classrooms to make more space. Throughout this risk assessment is the awareness of risk control knowing that maintaining a distance between people whilst inside and reducing the amount of time they are face to face lowers the risk of transmission</p> <p>2 Having an implementation plan of how the pupils and staff will be grouped, and this will be monitored from September, but staff within the school are permitted to operate across different classes and groups in order to facilitate the delivery of the school timetable.</p>	MED	<p>Discuss differentiated groups organisation ('bubbles'). Communicate to stakeholders (see Communication strategy)</p> <p>Discuss differentiated groups organisation ('bubbles'). Communicate to stakeholders (see Communication strategy)</p>	<p>CRT EHT/ EHoS</p> <p>CRT EHT/ EHoS</p>	<p>26/8 1/9</p> <p>26/8 1/9</p>

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		<p>Distance should be kept where possible and when working with younger pupils, moving between groups should only be used where necessary to deliver the full curriculum</p> <p>3 The focus is that we must do everything possible to minimise contacts and mixing while delivering a broad and balanced curriculum, consistent groups limit those in contact with each other and therefore limit the risk of transmission. Maintaining these groups will also make it quicker and easier to identify those who need to self-isolate if a case of Covid-19 arises within the group.</p> <p>4 The overarching principle to apply is reducing the number of contacts between children and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and both measures will help, but the balance between them will change depending on:</p> <ul style="list-style-type: none"> • children's ability to distance • the lay out of the school • the feasibility of keeping distinct groups separate while offering a broad curriculum <p>5 It is likely that for younger children the emphasis will be on separating groups, and for older children it will be on distancing. For children old enough, they should also be supported to maintain distance and not touch staff where possible.</p> <p>6 Measures within the classroom:</p> <ul style="list-style-type: none"> • Reducing face to face contact • 2 metres should be maintained where possible, whilst ensuring all pupils, including those with complex needs, continue to receive the best education possible whilst reducing risk. • Children encouraged to maintain distance and not touch staff or peers. • Smaller groups can help reduce risks. • Where possible, classrooms should be adapted by removing excess furniture and seating pupils side by side rather than face to face or side-on. <p>7 Measures outside the classroom</p> <ul style="list-style-type: none"> • Groups will kept apart from each other, avoiding large gatherings such as assemblies and collective worship. • Timetabling to allow groups to be kept separate and minimise movement around the site • Staggered breaks and lunchtimes, giving time for cleaning between groups 		<p>All following points to be considered in differentiated groups organisation discussion and communicated to stakeholders</p>		
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		<ul style="list-style-type: none"> Shared staff spaces to help to distance, ensuring staff have a reasonable break <p>8. Arriving and leaving school</p> <ul style="list-style-type: none"> Where travel patterns allow, schools will consider staggered start and finish times to keep groups apart (This should not reduce overall teaching time) Condensing/ staggering free periods and break times Starting or finishing earlier or later to avoid busy times Communicating changes to parents so they understand drop off and collection processes and visiting the site with or without an appointment. The safe removal of face coverings for pupils and staff (Not touching their face, washing hands immediately, disposal of temporary coverings in a covered bin or plastic bag for reusable PPE, washing hands again.) at the entrance of the school as face covering are not required at this present time <p>9. Pupils with SEND or EHCP will need specific help for the routine changes and new processes, plans need to be in place (For example, social stories and educational resources)</p> <p>10. Supply/ peripatetic teachers and other temporary staff can move between schools but should ensure distancing is maintained where possible.</p> <p>11. Specialists, therapists, clinicians and other support staff should provide interventions as usual, following safety guidelines where possible.</p> <p>12. Management of other visitors to site such as contractors should be considered as part of this risk assessment and explained to visitors on arrival. They must be recorded and should be kept outside of school hours where possible.</p> <p>13. Where a child routinely attends more than one setting on a part-time basis, a system of controls to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the child.</p> <p>14. During the summer term, the use of equipment was minimised, and there was significant extra cleaning. This has now changed because the prevalence of coronavirus (COVID-19) has decreased. For essential equipment, such as pencils and pens, it is recommended that staff and pupils have their own items that are not shared. Classroom-based resources, such as books and games, can be used and shared within the bubble; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between classes or bubbles, such as</p>				
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		<p>sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles</p> <p>LBTH CHSS Advice: Schools may be able to implement smaller groups than the size of a full class. If that can be achieved, it is recommended, as this will help to reduce the number of people who could be asked to isolate should someone in a group become ill with coronavirus (COVID-19).</p> <p>Schools should assess their circumstances and if class-sized groups are not compatible with offering a full range of subjects or managing the practical logistics within and around school, they can look to implement year group sized 'bubbles'. Whatever the size of the group, they should be kept apart from other groups where possible and older children should be encouraged to keep their distance within groups. Schools with the capability to do it should take steps to limit interaction, sharing of rooms and social spaces between groups as much as possible. When using larger groups, the other measures from the system of controls become even more important, to minimise transmission risks and to minimise the numbers of pupils and staff who may need to self-isolate. We recognise that younger children will not be able to maintain social distancing, and it is acceptable for them not to distance within their group.</p> <p>Both the approaches of separating groups and maintaining distance are not 'all-or-nothing' options, and will still bring benefits even if implemented partially. Some schools may keep children in their class groups for the majority of the classroom time, but also allow mixing into wider groups for specialist teaching, wraparound care and transport. Siblings may also be in different groups. Endeavouring to keep these groups at least partially separate and minimising contacts between children will still offer public health benefits as it reduces the network of possible direct transmission.</p> <p>All teachers and other staff can operate across different classes and year groups in order to facilitate the delivery of the school timetable. Where staff need to move between classes and year groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Again, we recognise this is not likely to be possible with younger children and teachers in primary schools can still work across groups if that is needed to enable a full educational offer.</p>				
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<p>6.PPE</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 The majority of staff in education settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:</p> <ul style="list-style-type: none"> where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and <u>only then if a distance of 2 metres cannot be maintained</u> where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used <p>Read the guidance on safe working in education, childcare and children's social care for more information about preventing and controlling infection, including when, how PPE should be used, what type of PPE to use, and how to source it.</p>	<p>LOW</p>	<p>Communicate to stakeholders (see Communication strategy)</p>	<p>EHT/ EHoS</p>	<p>1/9</p>
RESPONSE						
What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
<p>7.Test and trace</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Schools must ensure they understand the NHS Test and Trace process and how to contact their local Public Health England health protection team. Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:</p> <ul style="list-style-type: none"> book a test if they are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace self-isolate if they have been in close contact with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19) <p>2 Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS testing and tracing for coronavirus website, or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing.</p>	<p>LOW</p>	<p>Communicate to stakeholders (see Communication strategy)</p> <p>Ensure procedures are followed as advised here.</p> <p>See Appendix 7.1</p>	<p>EHT/ EHoS</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>As arises</p>

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		<p>3 Schools should ask parents and staff to inform them immediately of the results of a test:</p> <ul style="list-style-type: none"> if someone tests negative, if they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can stop self-isolating. if someone tests positive, they should follow the ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’ and must continue to self-isolate for at least 7 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 7-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 14 days. 		See Appendix 7.2		
<p>8. Confirmed cases</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Schools must take swift action when they become aware that someone who has attended has tested positive for coronavirus (COVID-19). Schools should contact the local health protection team. This team will also contact schools directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the school – as identified by NHS Test and Trace.</p> <p>2 Based on the advice from the health protection team, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 14 days since they were last in close contact with that person when they were infectious. Close contact means:</p> <ul style="list-style-type: none"> direct close contacts - face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin) proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual travelling in a small vehicle, like a car, with an infected person <p>3 Household members of those contacts who are sent home do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to</p>	MED	<p>Communicate to stakeholders (see Communication strategy)</p> <p>Ensure procedures are followed as advised here.</p> <p>See Appendix 8.1</p> <p>See Appendix 8.2</p> <p>See Appendix 8.3</p>	<p>EHT/ EHoS</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>As arises</p>

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		<p>self-isolate develops symptoms themselves within their 14-day isolation period they should follow ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’. They should get a test, and:</p> <ul style="list-style-type: none"> • if the test delivers a negative result, they must remain in isolation for the remainder of the 14-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days. • if the test result is positive, they should inform their setting immediately, and must isolate for at least 7 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 14-day isolation period). Their household should self-isolate for at least 14 days from when the symptomatic person first had symptoms, following ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’ <p>4 Schools should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.</p> <p>Further guidance is available on testing and tracing for coronavirus (COVID-19).</p>				
<p>9.Outbreak</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 If schools have two or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak, and must continue to work with their local health protection team who will be able to advise if additional action is required.</p> <p>In some cases, health protection teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – perhaps the whole site or year group. 2 If schools are implementing controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole school closure based on cases within the school will not generally be necessary, and should not be considered except on the advice of health protection teams.</p> <p>3 In consultation with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person’s class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.</p>	LOW	<p>Communicate to stakeholders (see Communication strategy)</p> <p>Ensure procedures are followed as advised here.</p> <p>See Appendix 9.1</p>	<p>EHT/ EHoS</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>As arises</p>

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OTHER MEASURES						
What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
10. Educational Visits Coronavirus (COVID-19) (CV19) with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 In the autumn term, schools can resume non-overnight domestic educational visits. 2 This should be done in line with protective measures, such as keeping children within their consistent group, and the coronavirus (COVID-19) secure measures in place at the destination. 3 Schools should also make use of outdoor spaces in the local area to support the delivery of the curriculum	MED	Discuss approach for educational visits Communicate to stakeholders (see Communication strategy)	SLT EHT/ EHoS	w/b 31/8 w/b 31/8
11. Individual Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency Causing severe infection/disease	1 Following the reduction in the prevalence of coronavirus (COVID-19) and relaxation of shielding measures from 1 August, it is expected that most staff will attend school. It remains the case that wider government policy advises those who can work from home to do so. The DFE recognise this will not be applicable to most school staff, but where a role may be conducive to home working, for example some administrative roles, school leaders should consider what is feasible and appropriate. 2 Schools may need to alter the way in which they deploy their staff, and use existing staff more flexibly to welcome back all pupils at the start of the autumn term. Schools can continue to engage supply teachers and other supply staff during this period. 3 Individual risk assessments should be completed for school staff with any vulnerable conditions, in line with current government guidance Staff who are clinically vulnerable or extremely clinically vulnerable Where schools apply the full measures in the DFE guidance the risks to all staff will be mitigated significantly, including those who are extremely clinically vulnerable and clinically vulnerable. We expect this will allow most staff to return to the workplace, although we advise those in the most at risk categories to take particular care while community transmission rates continue to fall. Advice for those who are clinically-vulnerable, including pregnant women , is available. Individuals who were considered to be clinically extremely vulnerable and received a letter advising them to shield are now advised that they can return to work from 1 August as long as they	MED	SLT to consider all staff shielding requests on merits following an individual RA. SLT to discuss any staff deployment issues Individual RAs to be completed as required Communicate to stakeholders (see Communication strategy)	SLT SLT EHT/ EHoS EHT/ EHoS	As arises w/b 31/8 As arises 1/9

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		<p>maintain social distancing. Advice for those who are extremely clinically vulnerable can be found in the guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19.</p> <p>School leaders should be flexible in how those members of staff are deployed to enable them to work remotely where possible or in roles in school where it is possible to maintain social distancing.</p> <p>People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.</p> <p>Staff who are pregnant As a general principle, pregnant women are in the 'clinically vulnerable' category and are advised to follow the relevant guidance available for clinically-vulnerable people.</p> <p>Staff who may otherwise be at increased risk from coronavirus (COVID-19) Some people with particular characteristics may be at comparatively increased risk from coronavirus (COVID-19), as set out in the COVID-19: review of disparities in risks and outcomes report. The reasons are complex and there is ongoing research to understand and translate these findings for individuals in the future. If people with significant risk factors are concerned, the school leadership will complete an individual risk assessment</p>		<p>Communicate to stakeholders (see Communication strategy)</p> <p>Communicate to stakeholders (see Communication strategy)</p>	<p>EHT/ EHoS</p> <p>EHT/ EHoS</p>	<p>1/9</p> <p>1/9</p>
<p>12. Physical Education</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Schools have the flexibility to decide how physical education, sport and physical activity will be provided whilst following the measures in their system of controls.</p> <p>2 Pupils should be kept in consistent groups, sports equipment thoroughly cleaned between each use by different individual groups, and contact sports avoided.</p> <p>3 Outdoor sports should be prioritised where possible, and large indoor spaces used where it is not, maximising distancing between pupils and paying scrupulous attention to cleaning and hygiene</p> <p>This is particularly important in a sports setting because of the way in which people breathe during exercise. External facilities can also be used in line with government guidance for the use of, and travel to and from, those facilities.</p> <p>Schools should refer to the following advice:</p> <ul style="list-style-type: none"> guidance on the phased return of sport and recreation and guidance from Sport England for grassroots sport 	<p>LOW</p>	<p>Discuss approach for P.E. activities, including external coaches.</p> <p>Communicate to stakeholders (see Communication strategy)</p>	<p>SLT</p> <p>EHT/ EHoS</p>	<p>w/b 31/8</p> <p>w/b 31/8</p>

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		<ul style="list-style-type: none"> advice from organisations such as the Association for Physical Education and the Youth Sport Trust <p>4 Schools are able to work with external coaches, clubs and organisations for curricular and extra-curricular activities where they are satisfied that this is safe to do so.</p> <p>5 Schools should consider carefully how such arrangements can operate within their wider protective measures.</p> <p>6 Activities such as active miles, making break times and lessons active and encouraging active travel help enable pupils to be physically active while encouraging physical distancing.</p>				
13. Pupil Wellbeing Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	<p>1 Schools should consider the provision of pastoral and extra-curricular activities to all pupils designed to:</p> <ul style="list-style-type: none"> support the rebuilding of friendships and social engagement address and equip pupils to respond to issues linked to coronavirus (COVID-19) support pupils with approaches to improving their physical and mental wellbeing <p>2 Schools to ensure the promotion of awareness of the virus suitable for the age group, with the repeated gentle reminders of control measures</p>	MED	<p>Pupils already noted as vulnerable and others identified by teachers, other staff and parents/ carers to be discussed by Inclusion team.</p> <p>Communicate to stakeholders (see Communication strategy)</p>	All staff EHT/ EHoS+	Ongoing 1/9 and ongoing
14. Staff wellbeing Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	<p>1 Change management and information sharing is vital</p> <p>2 Support for staff wellbeing as some staff may be particularly anxious about returning to school. The Department for Education is providing additional support for both pupil and staff wellbeing in the current situation. Information about the extra mental health support for pupils and teachers is available.</p> <p>The Education Support Partnership provides a free helpline for school staff and targeted support for mental health and wellbeing</p>	MED	<p>Staff wellbeing to considered by SLT and SPM. Staff can self-refer or share concerns re other members of staff.</p>	SLT/ SPM	Ongoing
15. Behaviour change/ support Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	<p>1 Assessment and implementation of 'change management' for behaviour, recognising that the school's control measures for the virus is actually all based on human behaviour to manage, i.e. washing hands, respiratory health, cleaning, staying at home when have symptoms, staying at a distance, all of which requires training, support, guidance, correction, monitoring</p>	MED	<p>Communicate to stakeholders (see Communication strategy)</p>	EHT/ EHoS	1/9 and ongoing

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16. Ventilation Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Keep ventilation systems maintained regularly and adjusting systems where necessary 2 Premises maintain/monitor ventilation systems 3 Premises to check service and or adjustments required, so that they do not automatically reduce ventilation levels due to lower than normal occupancy 4 Opening windows and doors frequently to encourage ventilation where possible 5 Keep the systems operating continuously, i.e. not shutting down at weekends	LOW	School has no ventilation machines N/A N/A Designated windows and doors to be opened at start of day N/A	PM/ CT	Daily
17. First aid Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 There are no additional PPE requirements because of coronavirus (COVID-19) for first aid, or for non-symptomatic children who present behaviours which may increase the risk of droplet transmission or who require care that cannot be provided without close hands-on contact 2 It is accepted that 2m social distancing cannot be maintained during the delivery of first aid, but physical contact should be kept to a minimum e.g. pupils apply cold pack, wipe, plaster where able to do so. 3 First aid rooms can be very busy and are often small rooms. Schools should make arrangement for only one person being treated in the first aid room at a time and allocate another room / area as a waiting/collection area. 4 If daily medication is administered from 1 st aid rooms then consider if this needs relocating to reduce demand on space	MED	Notify first-aiders and other staff of all of these points. (see Communication strategy) Use back office for overflow. Notify first-aiders and other staff of these measures	EHT/ EHoS CRT	1/9 26/8
18. Staff room/ kitchens Kitchen staff Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Social distancing in place with signage 2 Zip taps/ Kettles to be cleaned 3 Staff reminded with signage next to Zip taps NOT to allow their cups to touch the Zip tap 4 Staff behaviour staying alert to others around them and keeping to the 2 metre rule as a minimum wherever possible 5 Staff to wash their hands before / after eating for at least 20 seconds 6 Staff to dispose of their food waste into the bins provided, and clean their cutlery and put away 7 Staff not to share cups and cutlery	MED	Check signage is in place. Communicate points 3 to 8 to stakeholders (see Communication strategy)	PrTm EHT/ EHoS	26/8 1/9

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		8 Staff to be encourage to go outside during breaks 9 These areas to have an increased cleaning regime in place managed and monitored		Review cleaning regime	PrTm	26/8
19. Kitchens Main kitchen Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 kitchen's will be fully open from the start of the autumn term and normal legal requirements will apply about provision of food to all pupils who want it, including for those eligible for benefits-related free school meals or universal infant free school meals. School kitchens can continue to operate, but must comply with the guidance for food businesses on coronavirus (COVID-19) . 2 Ensure social distancing is in place for the kitchen and kitchen staff wherever possible, and ask to review the contract kitchen Covid-19 risk assessment, as significant changes due to the full opening of the school 4 Social distancing at the servery which is managed and monitored 5 If the social distancing cannot be managed in this area a review of shielding/ sneeze screens to be considered to protect the kitchen staff serving 6 Staff and pupils to be encouraged to wash their hands before / after eating for at least 20 seconds and frequently during the day 7 Communication with contract services re covid-19 sickness procedures in place to ensure that the school to be informed of any covid-19 related staff/agency sickness, without delay, including plan if the whole kitchen crew have to self- isolate, re Test and Trace planning	MED	Noted. Check with cook that Kitchen actions are in place. Communicate to stakeholders (see Communication strategy). Check with school cook	EHT/ EHoS/ SchCk EHT/ EHoS/ SchCk EHT/ EHoS/ SchCk	1/9 1/9 1/9
20. Water fountains Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Switch the water fountains off and provide water via bottles, or having the pupils use their own personal bottle 2 Having a designated area for pupils to store or/have access to water 3 If have water coolers provide disposable cups	LOW	Water fountains switched off. Confirm water access arrangements and communicate to stakeholders (see Communication strategy).	CRT EHT/ EHoS	26/8 1/9
21. Swimming pools swimming Coronavirus (COVID-19) (CV19)	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Follow current Government guidance (this will be changing with new guidance expected) and update risk assessment before opening 2 Ensure the pool equipment receives the required maintenance, and recommissioning required in preparing to open 3 Assess the changing rooms and pool area for social distancing, to ensure a restriction of numbers, limits are decided before re-	LOW	All swimming activities suspended until January 2021 at earliest. Communicate to stakeholders (see Communication strategy)	EHT/ EHoS	1/9

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Someone entering the school/workplace/offices with CV19		<p>opening, this will include pool side and all areas of pool, changing rooms</p> <p>4 Review the area for touch points, shared equipment, commonly used equipment, that may have to have an increased cleaning regime, and/or removal of some equipment</p> <p>5 Ancillary equipment such as hoists, plant room equipment, will require an assessment review of compliance re service/maintenance schedules</p> <p>6 Health and safety inspection of all areas in preparation for opening</p> <p>7 Cleaning to be completed as part of the recovery stage planning</p>				
<p>22. building/ estate</p> <p>Building preparedness/Statutory compliance</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Following a risk assessment, some schools may determine that small adaptations to their site are required, such as additional wash basins. This will be at the discretion of individual schools, based on their particular circumstances.</p> <p>2 It is important that, prior to reopening for the autumn term, all the usual pre-term building checks are undertaken to make the school safe. If buildings have been closed or had reduced occupancy during the coronavirus (COVID-19) outbreak, water system stagnation can occur due to lack of use, increasing the risks of Legionnaires' disease. Advice on this can be found in the guidance on Legionella risks during the coronavirus outbreak.</p> <p>3 Additional advice on safely reoccupying buildings can be found in the Chartered Institute of Building Services Engineers' guidance on emerging from lockdown.</p> <p>4 Once the school is in operation, it is important to ensure good ventilation. Advice on this can be found in Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak.</p> <p>5 In classrooms, it will be important that schools improve ventilation (for example, by opening windows).</p> <p>6 Statutory compliance completed and up to date</p>	MED	<p>Discuss whether adaptations needed</p> <p>Check for water stagnation</p> <p>Review advice and share with CRT as appropriate.</p> <p>See section 16 above.</p> <p>Windows to be opened as appropriate.</p> <p>Check compliance</p>	<p>CRT</p> <p>PM/ CT</p> <p>PM/ CT</p> <p>PM/ CT/ teachers</p> <p>PrTm</p>	<p>26/8</p> <p>26/8</p> <p>26/8</p> <p>Daily</p> <p>26/8</p>
<p>23. Contractor/ visitor</p> <p>Contractors/Visitors/ Parents</p> <p>Coronavirus (COVID-19) (CV19)</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Only necessary contractors to be allowed on site, and approved/ authorised by managers</p> <p>2 Agency staff and contractors to be inducted to the normal health and safety induction processes, including the current COVID-19 risk assessments and social distancing requirement, and promotion of hand cleaning and hygiene</p>	MED	<p>Review information sheet for contractors outlining the measures in this section.</p> <p>Non-emergency contractual work to be arranged for holiday periods.</p>	<p>PrTm</p> <p>EHT/ EHoS/ PrTm</p>	<p>26/8</p> <p>Ongoing</p>

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Someone entering the school/workplace/offices with CV19		<p>3 Pre-communicated to ensure a health check question-set is asked regarding any symptoms of COVID-19, and information given to them before they get to site on the social distancing and COVID-19 management standards in place</p> <p>4 Normal risk assessment, method statements review, considering your own COVID-19 risk assessment to review if the works will compromise social distancing for others, such as increasing of numbers of people by contractors working in staff areas breaking the social distancing requirements</p> <p>5 Normal management and monitoring of contractor works, wellbeing on site</p> <p>6 School to assess to keep the parents off site and reduce the concerns of gatherings, this is a school based review/ plan, supported by regular communication</p>		<p>Discuss parental access to site. Communicate to stakeholders (see Communication strategy)</p>	<p>CRT</p> <p>EHT/ EHoS</p>	<p>26/8</p> <p>1/9</p>
<p>24.Change management</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Providing clear consistent and regular communication to improve understanding for all staff throughout the pandemic</p> <p>2 Providing early information instruction before any changes to working practices</p> <p>3 Keeping all risk assessments/ changes in risk updated as government guidance seems to be updating daily, weekly</p> <p>4 Full guidance to staff on changes to work environment and procedures in advance of any physical changes</p> <p>5 Increased staff communication to raise awareness of potential risks; directing staff to Government, NHS, PHE and local Council guidelines and resources:</p> <ul style="list-style-type: none"> NHS guidance, how to wash your hands video (20 second rule) NHS advice on CV19; risks, symptoms, how CV19 is spread, how to avoid catching or spreading germs School intranet page; communication on local newsletters Information posters displayed at key points and throughout premises Hygiene requirements (handwashing etc.) and practise of social distancing (2 metres) <p>6 Follow signage of egress and access to premises</p> <p>7 Government/LA guidance on trace and track measures and clear guidance to managers and staff on actions required and support available</p>	MED	<p>Produce and share Communication Strategy</p> <p>Covered in Communication Strategy</p> <p>Review RA as required</p> <p>Keep staff informed as per Communication Strategy</p> <p>Include information in SIB.</p> <p>Review signage and reinforce messages.</p> <p>Include information in SIB.</p>	<p>EHT/ EHoS</p> <p>-</p> <p>CRT</p> <p>EHT/ EHoS</p> <p>EHT/ EHoS</p> <p>EHT/ EHoS/ PrTm</p> <p>EHT/ EHoS</p>	<p>1/9 and ongoing</p> <p>-</p> <p>Daily/ weekly</p> <p>As needed</p> <p>1/9 and ongoing</p> <p>26/8</p> <p>1/9</p>

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<p>25. Stress and anxiety</p> <p>Stress and anxiety concerning returning to work</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Managers to identify staff with stress or anxiety and complete a follow up stress risk assessment</p> <p>2 For staff who have returned into work whether to be communicated with by sharing risk assessments and control measures for covid-19 controls</p> <p>3 Ongoing clear communication between individuals / teams/ homeworkers and managers is clear:</p> <ul style="list-style-type: none"> • Agreed work activities • Scheduled calls / contact time • Access to resources e.g. Employee Assistance Programme (EAP) • Wellbeing and Health on HR website (includes stress risk assessment) <p>4 Review of pupils that present stress and anxiety due to the covid-19 fears</p> <p>5 Pupils and families who are anxious about return to school</p> <p>All other pupils must attend school. This may include pupils who have themselves been shielding previously but have been advised that this is no longer necessary, those living in households where someone is clinically vulnerable, or those concerned about the comparatively increased risk from coronavirus (COVID-19), including those from Black, Asian and Minority Ethnic (BAME) backgrounds or who have certain conditions such as obesity and diabetes.</p> <p>If parents of pupils with significant risk factors are concerned, we will discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school. We will be clear with parents that pupils of compulsory school age must be in school unless a statutory reason applies (for example, the pupil has been granted a leave of absence, is unable to attend because of sickness, is absent for a necessary religious observance etc.).</p>	<p>MED</p>	<p>See sections 13 and 14 above.</p> <p>SLT and Inclusion teams to identify staff and pupils exhibiting stress and/ or anxiety and to propose action.</p>	<p>SLT/ Inclusion team</p>	<p>Weekly</p>
<p>26. Transport</p> <p>Coronavirus (COVID-19) (CV19)</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 Social distancing has significantly reduced available transport capacity. The new DFE guidance sets out a new framework for supporting transport to and from schools from the autumn term.</p> <p>They have made a distinction between dedicated school transport and wider public transport:</p> <ul style="list-style-type: none"> • dedicated school transport means services that are used only to carry pupils to school. This includes statutory home to school transport, but may also include some existing or new commercial travel routes, where they carry school pupils only 	<p>LOW</p>	<p>There are no plans to use dedicated school transport at present.</p> <p>If transport is used, e.g. for an educational visit, a full RA will be carried out.</p>	<p>-</p>	<p>-</p>

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<p>Someone entering the school/workplace/offices with CV19</p>		<ul style="list-style-type: none"> • public transport services means routes which are also used by the general public <p>Dedicated school transport, including statutory provision Pupils on dedicated school services do not mix with the general public on those journeys and tend to be consistent. This means that the advice for passengers on public transport to adopt a social distance of two metres from people outside their household or support bubble, or a 'one metre plus' approach where this is not possible, will not apply from the autumn term on dedicated transport.</p> <p>It is important to consider:</p> <ul style="list-style-type: none"> • how pupils are grouped together on transport, where possible this should reflect the bubbles that are adopted within school • use of hand sanitiser upon boarding and/or disembarking, and how this is supervised and managed • additional cleaning of vehicles • organised queuing and boarding where possible • distancing within vehicles wherever possible • the use of face coverings for children over the age of 11, where appropriate, for example, if they are likely to come into very close contact with people outside of their group or who they do not normally meet <p>Dedicated school services can take different forms. Some journeys involve coaches regularly picking up the same pupils each day, others involve use of a minibus whilst other services are used by different pupils on different days, or by pupils with SEND. The precise approach taken will need to reflect the range of measures that are reasonable in the different circumstances.</p> <p>It will also require a partnership approach between local authorities, schools, trusts, dioceses and others. In particular, it is imperative that schools work closely with local authorities that have statutory responsibility for 'home to school transport' for many children, as well as a vital role in working with local transport providers to ensure sufficient bus service provision. <u>DfE will shortly publish new guidance to local authorities on providing dedicated school transport, based on the framework outlined here.</u></p> <p>Given the pressures on public transport services it may also be necessary to work with local authorities so that they can identify where it might be necessary to provide additional dedicated school transport services, including in places where these services do not currently operate. The government is currently evaluating this position and will set out next steps shortly.</p>				
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		<p>Wider public transport In many areas, pupils normally make extensive use of the wider public transport system, particularly public buses. We expect that public transport capacity will continue to be constrained in the autumn term. <u>Its use by pupils, particularly in peak times, should be kept to an absolute minimum.</u></p> <p>To facilitate the return of all pupils to school, it will be necessary to take steps to both depress the demand for public transport and to increase capacity within the system. Both will require action at a national and local level. Schools have a critical role to play in supporting collaboration between all parties - providers, local authorities, parents and pupils.</p> <p><u>Schools should work with partners to consider staggered start times to</u> enable more journeys to take place outside of peak hours. We recognise that this option will be more feasible in some circumstances than others.</p> <p><u>Schools should encourage parents, staff and pupils to walk or cycle to school if at all possible.</u> Schools may want to consider using 'walking buses' (a supervised group of children being walked to, or from, school), or working with their local authority to promote safe cycling routes.</p>		<p>School will support wider public transport measures through:</p> <p>Information in newsletters encouraging walking and cycling</p> <p>Staggered start times</p>		
<p>27. Pupils shielding</p> <p>Pupils shielding</p> <p>Self-isolating</p> <p>Coronavirus (COVID-19) (CV19)</p> <p>Someone entering the school/workplace/offices with CV19</p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<p>1 The majority of pupils will be able to return to school, but we note that:</p> <ul style="list-style-type: none"> a small number of pupils will still be unable to attend in line with public health advice because they are self-isolating and have had symptoms or a positive test result themselves; or because they are a close contact of someone who has coronavirus (COVID-19) shielding advice for all adults and children paused on 1 August, subject to a continued decline in the rates of community transmission of coronavirus (COVID-19). This means that even the small number of pupils who will remain on the shielded patient list can also return to school, as can those who have family members who are shielding. Read the current advice on shielding if rates of the disease rise in local areas, children (or family members) from that area, and that area only, will be advised to shield during the period where rates remain high and therefore they may be temporarily absent (see below). some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to school (usually at their next planned clinical 	LOW	<p>Communicate to stakeholders (see Communication strategy)</p>	EHT/ EHoS	1/9

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		appointment). You can find more advice from the Royal College of Paediatrics and Child Health at COVID-19 - 'shielding' guidance for children and young people .				
28.Music Music Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 We are aware that there may be an additional risk of infection in environments where you or others are singing, chanting, playing wind or brass instruments or shouting. This applies even if individuals are at a distance . 2 Schools should consider how to reduce the risk, particularly when pupils are playing instruments or singing in small groups such as in music lessons by, for example, physical distancing and playing outside wherever possible, limiting group sizes to no more than 15, positioning pupils back-to-back or side-to-side, avoiding sharing of instruments, and ensuring good ventilation. 3 Singing, wind and brass playing will not take place in larger groups such as school choirs and ensembles, or school assemblies. <u>Further more detailed DfE guidance will be published shortly</u> .	LOW	Discuss approach for music/singing activities. Communicate to stakeholders (see Communication strategy)	SLT EHT/ EHoS	w/b 31/8 w/b 31/8
29.Contingency planning Coronavirus (COVID-19) (CV19) Someone entering the school/workplace/offices with CV19	Employees, agency, Pupils, visitors Causing severe infection/disease	1 Contingency planning for outbreaks are being developed and are awaiting the updated information 2 If a local area sees a spike in infection rates that are resulting in localised community spread, appropriate authorities will decide which measures to implement to help contain the spread. 3 The DfE will be involved in decisions at a local and national level affecting a geographical area and will support appropriate authorities and individual settings to follow the health advice. <u>More information will be provided on this process in due course</u> . 4 For individuals or groups of self-isolating pupils, remote education plans should be in place. These should meet the same expectations as those for any pupils who cannot yet attend school at all due to coronavirus (COVID-19). 5 In the event of a local outbreak, the PHE health protection team or local authority may advise a school or number of schools to close temporarily to help control transmission. 6 Schools will need a contingency plan for this eventuality. This may involve a return to remaining open only for vulnerable children and the children of critical workers and providing remote education for all other pupils.		Update Contingency Plan so that it addresses all points set out here including containment measures, a return to limited opening and enhanced home learning measures.	SLT	By 4/9

APPENDIX 1

