

## RISK ASSESSMENT FORM

### Part A

<b>DEPARTMENT/ SERVICE</b>		Beckfoot Phoenix			
<b>Assessor/ Person(s) assisting with the assessment</b>		Rachel Stirland/ Jason Patefield		<b>DATE</b>	25/5/2021
<b>TASK / ACTIVITY</b> <small>(Include duration and frequency of task activity)</small>		<p><b>Full opening of Schools – 1<sup>st</sup> March 2021</b>  <b>Rebound and Swimming Pool opening – October 2020</b>  <b>Updated Guidance – 13 October 2020 Safe working in Education</b>  <b>17<sup>th</sup> May 2021 Roadmap 25/5/2021</b></p> <p><b>THIS DOCUMENT SUPPLEMENTS AND DOES NOT REPLACE DfE Guidance:</b>  <i>“Guidance for full opening – schools” (02/07/20). See the end of this document for full list of guidance used to compile this RA. Quotes from the guidance appear in italics.</i></p>			
		<b>Persons / groups at risk</b>			
		<b>A</b>	Employees	<b>E</b>	General Public / Pupils
		<b>B</b>	New Employees	<b>F</b>	Visitors
		<b>C</b>	Contractors / Sub-Contractors	<b>G</b>	Volunteers
		<b>D</b>	Young person / Work experience	<b>H</b>	Clients / Service users
		<b>Likelihood of occurrence X Severity of outcome = Risk Rating</b>			
		<b>Example:</b>			
		<b>Likelihood (possible 3) X Severity (Moderate 3) = Risk Rating (Medium 9)</b>			
<b>Likelihood of Occurrence</b>	<b>Severity of Outcome</b>				
	1 Negligible	2 Slight	3 Moderate	4 Severe	5 Very Severe
1 Very Unlikely	<b>LOW (1)</b>	<b>LOW (2)</b>	<b>LOW (3)</b>	<b>LOW (4)</b>	<b>LOW (5)</b>
2 Unlikely	<b>LOW (2)</b>	<b>LOW (4)</b>	<b>LOW (6)</b>	<b>MEDIUM (8)</b>	<b>MEDIUM (10)</b>
3 Possible	<b>LOW (3)</b>	<b>LOW (6)</b>	<b>MEDIUM (9)</b>	<b>HIGH (12)</b>	<b>HIGH (15)</b>
4 Probable	<b>LOW (4)</b>	<b>MEDIUM (8)</b>	<b>HIGH (12)</b>	<b>HIGH (16)</b>	<b>HIGH (20)</b>
5 Very Likely	<b>LOW (5)</b>	<b>MEDIUM (10)</b>	<b>HIGH (15)</b>	<b>HIGH (20)</b>	<b>HIGH (25)</b>

The Department of Education have made clear their expectation that all schools will be open for all pupils from March 8th. The guidance contains a PHE-Endorsed ‘system of controls’ (**numbered and bold in the base control measures below**), which build on the previous Hierarchy of Controls used. Where something is essential for public health reasons, the guidance uses the word ‘must’. Schools must comply with health and safety law and put in place proportionate control measures to protect staff, pupils and others.

Schools will re-open to all pupils from 8th March. There is an expectation that the system of controls will keep infection spread / Covid-19 cases in school to a low level. School will work closely with the Trust, the Local Authority, Public Health England and the DfE to ensure that any cases/outbreaks are managed carefully and all appropriate guidelines are followed.

Schools must apply the system of controls in a way that reduces risk to the lowest, reasonably practicable level, in a way that works for their

school, and allows them to deliver a broad and balanced curriculum for pupils.

The overriding principle is to reduce the number of contacts between children and staff through reduced mixing (through consistent groups) and increasing social distancing between individuals. The balance between these 2 options for reducing contacts will vary between schools depending on the ability of pupils to distance, the layout of the school and the requirement to provide a broad and balanced curriculum. In most circumstances, staff can maintain 2m social distancing between themselves and others they should do so.

## Part B

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
Decision to reopen against national scientific advice & government policy	ALL	5 x 4 = 20	The Government has made it clear that it's intention is for all schools to be open to all pupils in March 8th.	Continue to monitor DfE, SAGE and PHE guidance and amend risk assessment and decision to open accordingly.  All pupils and students should continue to attend education settings at all local COVID alert levels unless they are one of the very small number of pupils or students under pediatric or other specialist care and have been advised by their GP or clinician not to attend an education setting.	1 x 4 = 4
Decision to reopen against local assessment of transmission risk	ALL	5 x 4 = 20	The Trust continues to monitor the local situation using data from PHE surveillance and local advice from the Director of Public Health.		2 x 4 = 8
Spread of Covid-19 between pupils; staff; families of pupils/ staff.	ALL	4 x 4 = 16	<b>1. Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school</b>  N.B. There will always be residual risk from those who are asymptomatic.	Communicate with pupils and staff that if they feel unwell or have tested positive for Covid-19 in the last 7 days they must not attend school. Communicate with parents that if pupils feel unwell or have tested positive for Covid-19 in the last 7 days they must not attend school.  Communicate with staff, pupils and others that if they are displaying symptoms they should get tested for Covid-19.  Pupils, staff and other adults must not come into the school if <ul style="list-style-type: none"> <li>they have one or more coronavirus (COVID-19) symptoms</li> <li>a member of their household (including someone in their support bubble or childcare bubble if they have one) has coronavirus (COVID-19) symptoms</li> <li>they are required to quarantine having recently visited countries outside the Common Travel Area</li> </ul>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<ul style="list-style-type: none"> <li>• they have had a positive test they must immediately cease to attend and not attend for at least 10 days from the day after               <ul style="list-style-type: none"> <li>○ the start of their symptoms</li> <li>○ the test date if they did not have any symptoms but have had a positive test (whether this was a Lateral Flow Device (LFD) or Polymerase Chain Reaction (PCR) test)</li> </ul> </li> </ul> <p>Symptoms are a new continuous cough, a high temperature, or a loss of, or change in, your normal sense of taste or smell – anosmia)</p> <p>Communicate with visitors and contractors, that access to site is only possible with no symptoms, by following school procedures and practices and where appropriate carrying out a separate risk assessment.</p>	
		<b>5 x 4 = 20</b>	<p><b>Take Steps to identify asymptomatic cases amongst staff in school to reduce potential infection routes.</b></p> <p><b>See Trust procedure on “Dealing with Confirmed or Suspected Cases”</b></p> <p><b>Fully co-operate with the Government's rapid (LFD) testing programme. Tests will be undertaken at home by staff.</b></p>	<p>Follow guidance 'What to do if someone develops symptoms of coronavirus (COVID-19) whilst at an educational setting'.</p> <p>If a pupil is awaiting collection:</p> <ul style="list-style-type: none"> <li>• 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 pupil, with appropriate adult supervision if required</li> <li>• a window should be opened for fresh air ventilation if it is safe to do so</li> <li>• if it is not possible to isolate them, move them to an area which is at least 2 metres away from other people</li> <li>• 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</li> <li>• personal protective equipment (PPE) must be worn by staff caring for the pupil 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 guidance</li> </ul> <p>In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital, unless advised to</p>	<b>3 x 4= 12</b>

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>N.B. Government guidance states “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.”</p> <p>Eye protection (visor) is advised for the supervising adult in these circumstances. The guidance states: <b>[if] “there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn”</b></p> <p>It is considered there is a risk if someone is displaying symptoms and therefore eye protection and a mask should be worn (as per the Trust procedure). This is because we cannot predict the behaviour / symptoms that the pupil will display.</p> <p>Follow guidance on referring individuals suspected of having Covid-19 for testing, and subsequent actions based on the outcome of the test (return to the setting when well or isolation of cohort)</p>	
		3 x 4	2. Ensure face coverings are used in recommended circumstance	<p>Staff and visitors who cannot maintain social distancing between themselves and other adults should wear face coverings (e.g. on corridors and in other communal areas).</p> <p>Transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn.</p> <p>Face coverings should also be worn when within 2m of a child. Some individuals are exempt from wearing face coverings.</p> <p><b>Staff working with children who spit or have excess saliva, must still wear face covering/masks.</b></p> <p>This applies to those who:</p> <ul style="list-style-type: none"> <li>cannot put on, wear or remove a face covering because of a physical impairment or disability, illness or mental health difficulties</li> <li>speak to or provide help to someone who relies on lip reading, clear sound or facial expression to communicate</li> </ul> <p>Safe wearing of face coverings requires the:</p>	2 x 4 =8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<ul style="list-style-type: none"> <li>cleaning of hands before and after touching – including to remove or put them on</li> <li>safe storage of them in individual, sealable plastic bags between use where a face covering becomes damp, it should not be worn, and the face covering should be replaced carefully.</li> <li>staff and pupils may consider bringing a spare face covering to wear if their face covering becomes damp during the day</li> </ul> <p>Further action - additional risk assessment completed for those exempt.</p>	
		3 x 4 = 12	<p><b>3. Clean hands thoroughly more often than usual</b>  <i>Coronavirus (COVID-19) is an easy virus to kill when it is on skin. This can be done with soap and running water or hand sanitiser. Only use alcohol hand rub or sanitiser if soap and water not available.</i></p>	<p><i>Schools <b>must</b> ensure that all pupils and staff to wash hands regularly: when they arrive at school, when they return from breaks, when they change rooms and before and after eating or handling food, as well as after touching your face, blowing your nose and sneezing or coughing.</i></p> <p>Promote handwashing through posters and regular reminders and building it into school routines and behaviour expectations. To clean your hands, you should wash your hands thoroughly for 20 seconds with running water and soap and dry them thoroughly, or use alcohol hand rub/sanitiser ensuring that all parts of the hands are covered.</p> <p>Demonstrate good hygiene practice, make use of resources from e-bug and other sources</p> <p><i>Pupils who use saliva as a sensory stimulant or who struggle with 'catch it, bin it, kill it' may also need more opportunities to wash their hands. Continue to help pupils with complex needs to clean their hands properly.</i></p> <p>Provide alcohol rub where a sink is not readily available, and supervise it given the risks around ingestion.</p> <p>Ensure pupils who need supervision and/or help whilst washing hands receive it.</p>	2 x 4 = 8
		3 x 4 = 12	<p><b>4. Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach</b>  Implement the 'catch it, bin it, kill it' approach.</p>	<p>Refresh posters.</p> <p><i>Schools <b>must</b> ensure that they have enough tissues and bins available in the school to support pupils and staff to follow this</i></p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p><i>routine. Talk to all pupils and staff about respiratory and hand hygiene.</i></p> <p>Regular emptying of bins, class staff will empty if it is two thirds full during the day</p> <p><i>Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and the staff working with them, and is not a reason to deny these pupils face to face education.</i></p> <p>Avoid touching your mouth, eyes and nose. Cover your mouth and nose with disposable tissues when you cough or sneeze. If one is not available, sneeze into the crook of your elbow, not into your hand. Dispose of tissues into a disposable rubbish bag and immediately clean your hands with soap and water or use a hand sanitiser.</p>	
		<b>3 x 4 = 12</b>	<p><b>5. Maintain enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach</b></p> <p>PHE has published guidance on the cleaning of non-healthcare settings. This contains advice on the general cleaning required in addition to the existing advice on cleaning when there is a suspected case.</p>	<p>Identify surfaces that are regularly touched – such as desks, chairs, keyboards, handles, light switches and electronic devices (such as phones) etc. Instruct and ensure supervision of cleaning staff accordingly.</p> <p><i>Maintain the following points:</i></p> <ul style="list-style-type: none"> <li>• <i>continue to monitor and change if needed the cleaning schedule that ensures cleaning is generally enhanced and includes:</i> <ul style="list-style-type: none"> <li>○ <i>more frequent cleaning of rooms / shared areas that are used by different groups</i></li> <li>○ <i>frequently touched surfaces being cleaned more often than normal</i></li> </ul> </li> <li>• <i>different groups are allocated their own toilets blocks, toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet</i></li> </ul> <p>Prop doors open so they don't have to be touched. However, don't leave fire doors propped open and unattended, and must be shut in the case of a fire alarm.</p>	<b>2 x 4 = 8</b>
		<b>3 x 4 = 12</b>	<p><b>6. Minimise contact between individuals and maintain social distancing wherever possible</b></p> <p>Different elements of minimising contact and maintaining distancing are detailed by activity below</p>	<p><i>Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts, and schools <b>must</b> consider how to implement this. Schools <b>must</b> do everything possible to minimise contacts and mixing while delivering a broad and balanced curriculum.</i></p>	<b>2 x 4 = 8</b>

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
		3 x 4 = 12	<p><b>a) Grouping Children (Bubbles)</b>  <i>Consistent groups reduce the risk of transmission by limiting the number of pupils and staff in contact with each other to only those within the group</i></p>	<p>The following lists identify areas that are allocated to each bubble</p> <p>Orange Base - Two classrooms, Outside Play area and Hall, Rebound, Pool, Tyre Park, Forests School all (timetabled)</p> <p>Purple Base - Two classrooms, Outside Play area and Hall, Tyre Park, Forests School, Magic Mile all (timetabled)</p> <p>Yellow Base - Two classrooms, Outside Play area and Hall, Rebound, Pool, Tyre Park, Forests School all (timetabled)</p> <p>Red Base (Kate) - One classroom, Outside Play area and Hall, Pool, Tyre Park, Forests School all (timetabled)</p> <p>Red Base (Vikki) – One classroom, Outside Play area and Hall, Rebound, Tyre Park, Forests School all (timetabled)</p> <p>Blue Base - Two classrooms, Outside Play area and Hall, Soft Play, Tyre Park, Forests School, Magic Mile all (timetabled)</p> <p>Green Base - Two classrooms, Outside Play area and Hall, Tyre Park, Forests School, Magic Mile all (timetabled)</p> <p>Groups should be kept apart from other groups, were possible</p> <p>Young people with less complex needs who are able to self-regulate their behaviours without distress should be encouraged to keep distance within groups</p> <p>Where capacity allows, limit interaction and sharing of rooms and social spaces between groups.</p> <p>NB Benefits exist even if separating groups and maintaining distance can only be partially implemented</p>	2 x 4 = 8
		3 x 4 = 12	<p><b>b) Measures within the classroom</b>            Avoid close face to face contact and minimise time spent within 1m of anyone</p>	<p>Keep desk workstations as far apart as possible (1m) and staff, pupils must be divided across the base to ensure they are spread out to maintain distance where possible. Taff to try not to work unnecessarily close to one another or close to a pupil where possible</p> <p>Before any additional adults or external visitors enter the room, guidance and permission from either SLT or Jason must be obtained and a plan of action to be put in place to accommodate the additional person.</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>Pupils to be supervised when going to the toilet, manage toilet facilities so that they don't become overcrowded. They should be cleaned after each break, after lunchtime and at the end of the school day.</p> <p>Keep groups consistent. Teachers to stay with same group (as far as possible). Consider teaching lessons outside if possible.</p> <p>You 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. It might also include moving unnecessary furniture out of the classroom to make more space.</p> <p>Clean rooms between bubbles if they need to be shared and a more frequent cleaning of touched surfaces more often than normal, such as: play equipment and toys</p> <p>Adopt clear and comprehensive cleaning schedules.</p> <p>Zones to respond to emergencies e.g. Team teach and medical emergency – allocated evacuation room – where possible (time allows and does not escalate situation) if mixing PPE to be worn. Minimise soft furnishings and soft toys as far as is possible, and spray down with the pink fluid at the end of the day.</p>	
		4 x 4 = 16	<p><b>c) Close contact behavioural management</b></p> <p>Staff to carefully consider timetable, environment and expectations of pupils to reduce the need for restraint.</p>	<p>Behavioural management which requires the use of reasonable force or restraint as a last resort is carried out in line with the Use of Reasonable Force Policy.</p> <p>The school recognises that social distancing and infection control measures cannot be adhered to using reasonable force or exercising restraint on a pupil to control their behaviour to prevent them posing a significant risk to themselves or others.</p> <p>If a child is working their way towards a point of crisis, where a physical intervention may be necessary, the appropriate staff can make use of PPE to protect themselves should this situation arise.</p> <p>Staff should wear personal protective equipment (PPE), including aprons, gloves and masks. However, staff may not have time</p>	2 x 4 = 8



What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>to put PPE on if the pupil is hurting themselves and/or others, absconding and/or putting themselves and/or others at risk.</p> <p>Therefore, staff will take extra hygiene precautions in light of COVID-19, this includes having a change of clothes within school and staff to be offered time to wash their hands thoroughly and change their clothing (if desired) after the incident</p> <p>Washing of exposed area (including pupil's arms, where they've been held), after de-escalation</p> <p>Once a pupil no longer needs to be restrained for the safety of others or themselves, staff continue to adhere to the social distancing and infection control measures put in place.</p> <p>.</p> <p>If a member of staff develops coronavirus symptoms after using restraint or reasonable force, they are sent home immediately and advised to test for coronavirus.</p> <p>The decision on whether or not to physically intervene is down to the professional judgement of the member of staff concerned and has to be judged on a case-by-case basis.</p>	
		4 x 4 = 16	<p><b>d) Measures elsewhere</b></p> <p>i) corridors  <i>When timetabling, groups should be kept apart and movement around the school site kept to a minimum. While passing briefly in the corridor or playground is low risk, schools should avoid creating busy corridors, entrances and exits.</i></p>	<p>Staff to check corridors are clear before escorting pupil out.</p> <p>Pupils to be kept in their bubble areas for as much of the day as possible</p> <p>Pupils will not be asked to queue on corridors but should enter rooms immediately and go to their allotted desk where appropriate.</p> <p>Corridors and shared areas to be kept as clear as possible e.g. computers.</p>	2 x 4 = 8
		4 x 4 = 16	ii) break-times/outdoor lessons	<p>Pupils to play out in their own bubble play areas.</p> <p>Make sure pupils go straight outside and minimise the amount of time that pupils spend within 1 meter of each other.</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
		4 x 4 = 16	iii) lunchtimes	<p>Children will have dinners in classrooms and must be spread out between the base (not all in one class).</p> <p>A member of staff will go to the dining hall to collect the food trolley at the allocated times and must try and avoid others on the corridor.</p> <p>Orange and Yellow Base – collect 11.45am, return 12.30pm</p> <p>Blue Base – From 17<sup>th</sup> May, blue base to have lunch in the dining hall at 11.45am to 12.15pm</p> <p>Purple Base – From 7<sup>th</sup> June, purple base to have lunch in the dining hall at 12.20pm – 12.50pm</p> <p>Tables and chairs to be set up on the left-hand side the dining hall for blue base children. Kitchen staff will set up additional tables and chairs on the right-hand side of the dining hall after blue base children have left, for purple children on the second sitting.</p> <p>Red and Green Base – collect 12.10pm, return 12.55pm</p> <p>Staff will have their lunches in the following locations:</p> <p>Orange Base – Staff room  Purple Base – Room between classes and Small meeting room  Red Base (Kate) – Discreet dining room  Red Base (Vikki) – Small room between classrooms  Yellow Base – Conference room  Blue Base – PPA room (this will commence 8<sup>th</sup> March 2021)  Green Base – Food tech room</p>	2 x 4 = 8
		3 x 4 = 12	iv) school start/end	<p>Parents to be asked to keep two metres apart when collecting / dropping off pupils and to remain in cars where possible.</p> <p>Stagger start/ finish times.</p> <p>Parents should not congregate around doorways or in reception.</p> <ul style="list-style-type: none"> <li>• Consider other steps to control social mixing at pick-up and drop-off</li> <li>• Staff must adhere to 2m social distancing rule when arriving / departing school</li> <li>• Encourage parent-staff communication via technology (phone, app, email), and if a face-to-face conversation is</li> </ul>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>needed arrange by prior appointment and ensure social distancing arrangements are adhered to</p> <ul style="list-style-type: none"> <li>• Wherever possible parents to wear face mask when onsite</li> <li>• Staff will wear full PPE and use a thermometer to check the children's temperatures on arrival to school.</li> <li>• Each base will have a tray located at the front of school with a signing in and out sheet, pen, hand gel and a thermometer</li> </ul>	
		5 x 4 = 20	v) large events/assemblies	<p>Groups should be kept apart, meaning that schools should avoid gatherings such as assemblies or collective worship with more than one group.</p> <ul style="list-style-type: none"> <li>• No physical assemblies to take place.</li> <li>• Assembly by zoom / teams</li> </ul> <p>Under no circumstances should physical meetings / assemblies occur with pupils from more than one bubble.</p> <p>Educational day trips, in line with the roadmap educational trips will resume from 12<sup>th</sup> April. Any educational day visits must be conducted in line with relevant COVID-secure guidelines and regulations in place at that time. This includes system of controls, such as keeping children within their consistent groups and the COVID-secure measures in place at the destination.</p> <p>A thorough risk assessment will be completed for all trips. Advice will be sought from the Trust Compliance Officer and/or the Outdoor Education Team at the Council.</p> <p>Transition Days or Open Days / Taster Days are now a possible as long as they follow a risk assessment to ensure that they are run in line with our system of controls and align with the advice contained within this guidance and the roadmap out of lockdown.</p> <p>Holiday and After-school Clubs In line with the commencement of Step 3 of the roadmap, where wraparound and other extra-curricular activities for children are taking place indoors, they will be able to take place in groups of any number. However, until 17 May (in line with Step 3 of the roadmap) if the provision is taking place indoors, and it is not possible to group children in the same bubble as they are in during the school day, providers should keep children in consistent groups of no more than 15 children and at least one staff member.</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>From 17 May, in line with the commencement of Step 3 of the roadmap, where wraparound and other extra-curricular activities for children are taking place indoors, they will be able to take place in groups of any number.</p> <p>However, it remains important to continue to minimise mixing between children, where possible. This can be achieved by continuing to keep children in consistent groups every time they attend the setting.</p> <p>Smaller groups should be considered when it is not possible to do this. When considering appropriate group sizes it will be important to take into account factors such as the recommended occupancy levels of the premises you are operating from and levels of ventilation.</p>	
		3 x 4 = 12	vi) meetings	<p>Meetings not to be held unless 2m social distancing can be strictly maintained, and cleaned down after used.</p> <p>Ideally online meetings is preferable.</p> <p>Extended meetings in rooms with no external ventilation to always be avoided. Meetings to be held outside where possible.</p> <p>Limit meeting length as far as possible.</p>	
		3 x 4 = 12	vii) rebound	<p>Rebound is available for three bases, each of the bases listed will have sole use of the rebound room on the day allocated to them.</p> <p>Monday – Orange Wednesday – Yellow Friday – Red (Vikki)</p> <p>After use the rebound</p> <ul style="list-style-type: none"> <li>door to be locked</li> <li>staff will put a sign up saying room needed cleaning</li> <li>rebound key MUST not be used for different rooms and should be hung up outside the rebound room.</li> </ul> <p>Cleaning team will give the area a deep clean, cleaning wall and floor mats and the rebound bed using (Microsan) this chemical if certified safe to use on soft furnishings and is effective against bacteria including Coronavirus.</p> <p>If anyone has been symptomatic, the room will be left for 72 hours before cleaning where possible, or full PPE will be worn if cleaning needs to be quicker.</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
		3 x 4 = 12	viii) soft play	<p>This area is allocated to Blue Base only and will be cleaned down on a daily basis by the cleaning team, they will give the area a deep clean, cleaning wall and floor mats using (Microsan) this chemical if certified safe to use on soft furnishings and is effective against bacteria including Coronavirus.</p> <p>If anyone has been symptomatic, the room will be left for 72 hours before cleaning where possible, or full PPE will be worn if cleaning needs to be quicker.</p>	2 x 4 = 8
		3 x 4 = 12	ix) outdoor provision	<p>The following shared facilities must be timetabled and touch points will need to be cleaned before the area is used between bubbles</p> <ul style="list-style-type: none"> <li>• Tyre park</li> <li>• Forest school</li> <li>• Magic mile</li> </ul> <p>(see Jason for timetable)</p>	2 x 4 = 8
		3 x 4 = 12	x) swimming pool and changing areas for school staff and children, chemical levels	<p>Reduced amount of people in the pool water area, this will be made up of one NARS person to ensure pool safety and the maximum of six additional people.</p> <p>Staff must keep social distance as much as practically possible especially while in the water and avoid close face to face contact and minimise time spent within in 1 meter of any one.</p> <p>Parents and carers of the children that will be using the pool will have to give written permission before the child goes in the water. Parents need to know that staff will not be wearing PPE when in the water and this could be an increased risk.</p> <p>Some staff may not feel safe not using PPE when working with the children, therefore they must be given the option not to undertake the swimming if they are not fully confident that they will be safe. Staff to have this discussion with SLT. Identified staff who are vulnerable are NOT allowed to go in the pool water, they can however change wearing full PPE.</p> <p>Staff to wear facial PPE when hoisting and changing children. Pool and changing area to be used by one bubble for the full day and then cleaned down before next bubble.</p> <p>The pink cleaning fluid NOT to be used on the poolside due to cross contamination of chemicals, pool water can be used to wipe and</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>swill down the area on the poolside, however the pink cleaning fluid can be used in the changing rooms.</p> <p>Caretaker will clean down all touch points, handles, taps, emergency buttons at the end of the morning session to be ready for the afternoon session.</p> <p>All beds and benches that have been used by the children during the session must be cleaned down by the staff present using the cloths and pink cleaning fluid that has been provided.</p> <p>All used cloths must be placed in the bucket near the door that leads onto the main school corridor.</p> <p>Caretaker will ensure there are adequate amounts of cloths and cleaning spray available for each session and will remove all dirty cloths.</p> <p>Everyone must gel their hands on way in and out of the pool area and must ensure that gel and cleaning products are kept out of the reach of children.</p> <p>Staff and children to remove their shoes when entering the changing rooms to avoid any cross contamination or staff can put on blue shoe covers.</p> <p>Cleaning team will complete a full clean down on a daily basis, mopping the floor, cleaning showers, toilets and all touch points.</p> <p><b>As from 25/5/2021 swimming will be prioritised for children who have this in their EHCP</b></p> <p>This will be reviewed in September</p> <p>Staff who are Nars trained will receive training and guidance or their responsibilities when supervising a pool session.</p> <p>When changing children before and after swimming, staff to ensure that they have washed or gelled their hands and are wearing face protection and apron, hands to be washed or gelled when finished – will need more gel in there in places that children can't get to.</p> <p>If buoyancy aids and play equipment is to be used, these need to be cleaned down after the children have used them. The chlorine in</p>	

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>the water is a bleach and the NARS person to submerge all equipment in the pool water – <b>for 30 seconds</b> before returning it to the store room.</p> <p>If the pool music and light are to be used, these must be turned on in the morning session and turned off at the last session. All keyboards, and touch points must be cleaned after use by the NARS person.</p> <p>In the event a child needs to go to the toilet during the session, staff will wear PPE when assisting the child, the changing bed or toilet in the changing rooms to be used and cleaned down after using the pink cleaning spray by the member of staff assisting the child.</p> <p>Caretaker will ensure that there is enough bins in the changing rooms for the PPE waste and he will ensure that they are emptied regularly.</p> <p>If a member of staff needs to use the toilet, they will use the toilets in the shower rooms next to the pool office.</p> <p>Towels and costumes to be bagged and washed immediately if not going home.</p> <p>An electronic form has been created to reduce the need of staff moving around school to complete the pool risk assessment. This form will also be used for the Track and Trace of who has been in the pool. Each class will be given a QR code to scan to access the online form.</p> <p>In the event that the emergency alarm is activated, staff attending the incident must ensure that they have full PPE .</p> <p>Paper risk assessment will be printed off and issued to the relevant bubbles. Teacher or leaders of them bubbles must go through the risk assessment with all their staff, so everyone is clear on what is expected.</p> <p>Caretaker must ensure that the chemical levels are within is safe working levels.</p> <p>To ensure the pool levels are at the safe working level at all times, pool testing to be increased –</p>	

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<ul style="list-style-type: none"> <li>• one at the start of the day</li> <li>• one mid-morning, after the first session</li> <li>• one during lunch</li> <li>• one mid afternoon</li> <li>• one at the end of the day</li> </ul> <p>In the event the pool does <b>not</b> have the adequate amount of chemicals in the water, the pool <b>must</b> be closed and not opened until the pool has had two 45 minute cycles this will ensure the water is fully chlorinated.</p> <p>A further test will be needed before the pool is re-opened. More frequent back washes to ensure the filter tanks are kept clean and fully working.</p> <p>If in doubt the pool must be closed and external support from Bradford Council or Pool Tech must be obtained</p> <p><b><u>The following information has been taken from Swimming.org, The World Health Organisation, Public Health England and PWTAG.</u></b></p> <p>The World Health Organisation states that: "Conventional, centralised water treatment methods that utilise filtration and disinfection should inactivate the Covid-19 virus. Other human coronaviruses have been shown to be sensitive to chlorination and disinfection with ultraviolet (UV) light."</p> <p>The Pool Water Treatment Advisory Group (PWTAG) state that: "The available evidence shows that the physical effect of the pool water and an appropriate relationship between free chlorine and pH value should inactivate the virus within 15-30 seconds. The dilution of virus in the pool water volume will also reduce the risk of exposure and transmission."</p> <p>Furthermore, Swim England's Returning to Pools guidance and PWTAG technical notes have been produced in consultation with Public Health England, supporting the view that coronavirus would be inactivated at the levels of chlorine used in swimming pools.</p> <p>The air circulation systems within pool halls are designed to undertake at least four complete air changes every hour. Alongside this addition of fresh air our pool hall air circulation systems are designed to remove the air above the surface, which in turn should</p>	



What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>assist in removing airborne transmission of viruses. There is also anecdotal evidence that suggest that higher temperatures and humidities we have in pools can play a positive effect in reducing transmission of airborne particles.</p> <p>Again, we are also recommending further risk control measures such as maintaining social distance wherever possible, reducing the maximum number of swimmers allowed in a pool at any time.</p>	
		<b>3 x 4 = 12</b>	<b>7. Keep occupied spaces well ventilated</b>	<p>Good ventilation reduces the concentration of the virus in the air, which reduces the risk from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied and enclosed area.</p> <p>When school is in operation, it is important to ensure it is well ventilated and a comfortable teaching environment is maintained. These can be achieved by a variety of measures including: mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated.</p> <p>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</p> <ul style="list-style-type: none"> <li>• natural ventilation – opening windows (in cooler weather windows should 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</li> <li>• 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).</li> </ul> <p>The Health and Safety Executive guidance on air conditioning and ventilation during coronavirus outbreak and CIBSE coronavirus (COVID-19) advice provides more information.</p> <p>To balance the need for increased ventilation while maintaining a comfortable temperature, consider:</p> <ul style="list-style-type: none"> <li>• opening high level windows in colder weather in preference to low level to reduce draughts</li> <li>• increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is used)</li> </ul>	<b>2 x 4 = 8</b>

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<ul style="list-style-type: none"> <li>providing flexibility to allow additional, suitable indoor clothing – for more information see school uniform</li> <li>rearranging furniture where possible to avoid direct draughts.</li> </ul> <p>Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.</p>	
		3 x 4 = 12	8. Where necessary, wear appropriate personal protective equipment (PPE)	<p>From 17th May face coverings will no longer be a requirement for staff in classrooms. However, we continue to require that face coverings should be worn by staff and visitors in situations outside of classrooms (for example, when moving around in corridors and communal areas).</p> <p>All pupils and staff can wear face coverings at any time if they wish.</p> <p>Where schools are delivering education and training, including extra-curricular activities and wraparound childcare, in a community setting (for example, library or community centre), staff and pupils will be exempt from the legal requirement to wear a face covering if they are in a private room or the premises has been exclusively hired for the sole use of its pupils and staff.</p> <p>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"> <li>where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained</li> <li>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</li> </ul> <p>DfE, in collaboration with Public Health England, published new guidance in relation to children and young people who require an Aerosol Generating Procedure (AGP's) who are attending an education setting.</p> <p>The link to the full revised guidance can be found <a href="#">Safe Working in education, childcare and children's social care</a></p> <p>The link to the Aerosol Generating Procedures guidance can be found <a href="#">aerosol generating procedures (AGPs) in education and children's social care settings</a></p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>In summary the existing guidance has been revised and the interventions that are determined as an AGP's have been re-classified. Please see below re the re-classified list of interventions:</p> <p>Aerosol generating procedures (AGPs) AGPs that are commonly performed in education and children's social care settings include:</p> <ul style="list-style-type: none"> <li>· non-invasive ventilation (NIV)</li> <li>· bi-level positive airway pressure ventilation (BiPAP)</li> <li>· continuous positive airway pressure ventilation (CPAP)</li> <li>· respiratory tract suctioning beyond the oropharynx <a href="#">[footnote 1]</a> <a href="#">[footnote 2]</a></li> </ul> <p>Procedures that are not classed AGPs include:</p> <ul style="list-style-type: none"> <li>· oral or nasal suction</li> <li>· the administration of nebulised saline, medication or drugs</li> <li>· chest compressions or defibrillation</li> <li>· chest physiotherapy</li> <li>· the administration of oxygen therapy</li> <li>· suctioning as part of a closed system circuit</li> <li>· nasogastric tube insertion and feeding</li> </ul> <p>Staff who support children/young people with oral suction no longer need enhanced Personal Protective Equipment (PPE) when delivering care to the child/young person. This is significantly different to previously circulated guidance.</p> <p>The only children and young people who require enhanced PPE are children who have tracheostomies. Enhanced PPE includes:</p> <ul style="list-style-type: none"> <li>· a FFP2/3 respirator</li> <li>· gloves</li> <li>· a long-sleeved fluid repellent gown</li> <li>· eye protection</li> </ul> <p>For children/young people attending an education setting who have a tracheostomy separate contact will be made to schools to discuss delivery of AGP interventions going forward.</p> <p><a href="#">Beckfoot Trust</a> <a href="#">AGP Procedures in light of Guidance Changes (13<sup>th</sup> November 2020)</a></p>	

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>N.B. This is the Trust's interpretation of the guidance. It goes beyond what is suggested, but in our view is the best way to keep all safe and comply with the spirit of Health and Safety Law.</p> <ol style="list-style-type: none"> <li>1. Children that require other forms of suctioning from time to time (oral suctioning that does not invade past the oropharynx):               <ol style="list-style-type: none"> <li>a. Before this procedure takes place the pupil must be moved 2 metres away from other members of staff and pupils. The space should be well ventilated and, preferably, the procedure should take place near an open window.</li> <li>b. The member of staff undertaking the procedure must wear a surgical grade face mask (IIR) and a face shield. They must also wear a disposable apron and disposable gloves.</li> </ol> </li> </ol> <p>N.B. This is no longer classed as an AGP.</p>	
		3 x 4 = 12	<b>9. Promote and engage in asymptomatic testing, where available</b>	Rapid testing remains a vital part of our plan to suppress this virus.	2 x 4 = 8
		4 x 4 = 16	<b>10. Promote and engage with NHS Test and Trace process</b>	<p><i>Staff members, parents and carers will need to:</i></p> <ul style="list-style-type: none"> <li>• <i>book a test if they or their child has symptoms - the main symptoms are:</i> <ul style="list-style-type: none"> <li>○ <i>a high temperature</i></li> <li>○ <i>a new continuous cough</i></li> <li>○ <i>a loss or change to your sense of smell or taste</i></li> </ul> </li> </ul> <p><i>Self-isolate immediately and not come to school if:</i></p> <ul style="list-style-type: none"> <li>• <i>they develop symptoms</i></li> <li>• <i>they have been in close contact with someone who tests positive for coronavirus (COVID-19)</i></li> <li>• <i>anyone in their household or support or childcare bubble develops symptoms of coronavirus (COVID-19)</i></li> <li>• <i>they are required to do so having recently travelled from certain other countries</i></li> <li>• <i>they have been advised to isolate by NHS test and trace or the PHE local health protection team, which is a legal obligation</i></li> <li>• <i>provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace</i></li> </ul>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>Schools <b>must</b> 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"> <li>• <a href="#">book a test</a> if they are displaying symptoms.</li> <li>• 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</li> <li>• <a href="#">self-isolate</a> if they have been in close contact with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19)</li> </ul> <p>Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test.</p> <p>Essential workers, which includes anyone involved in education, childcare or social work, and their households, have priority access to testing. Schools also have access to a small number of home testing kits for use in line with guidance on home testing kits.</p> <p>Following the launch of the NHS COVID-19 app in England, settings may find it helpful to refer to the <a href="#">guidance on the use of the app in schools and further education colleges</a>. The app is intended for use by anyone aged 16 and over, including staff members, if they choose to do so. You should understand how the app relates to your setting's process for managing a positive case or an outbreak.</p> <p>Further guidance is available on <a href="#">NHS test and trace</a>, and there is also further <a href="#">guidance for schools</a>, <a href="#">guidance for further education</a> and <a href="#">guidance for early years providers</a>.</p> <p>If anyone displays symptoms whilst in school they should follow the Trust procedure "dealing with confirmed and suspected cases"</p>	
		4 x 4 = 16	<p><b>11. Manage confirmed cases of Coronavirus amongst the school community</b></p> <p>Schools <b>must</b> 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</p>	<p>The health protection team will work with schools in this situation to guide them through the actions they need to take. Based on the advice from the health protection team, schools <b>must</b> send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 10 days since they were last in close contact with that person when they were infectious.</p> <p>Close contact means:</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
			<p>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>	<ul style="list-style-type: none"> <li>• anyone who lives in the same household as someone with coronavirus (COVID-19) symptoms or who has tested positive for coronavirus (COVID-19)</li> <li>• anyone who has had any of the following types of contact with someone who has tested positive for coronavirus (COVID-19) with a PCR or LFD test: <ul style="list-style-type: none"> <li>○ face-to-face contact including being coughed on or having a face-to-face conversation within 1 metre</li> <li>○ been within 1 metre for 1 minute or longer without face-to-face contact</li> <li>○ sexual contacts o been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)</li> <li>○ travelled in the same vehicle or a plane</li> </ul> </li> </ul> <p>The health protection team will provide definitive advice on who must be sent home. To support them in doing so, we recommend schools keep a record of pupils and staff in each group, and any close contact that takes places between children and staff in different groups (see <a href="#">section 5 of system of control</a> for more on grouping pupils).</p> <p>Contact the Trust Covid Operations team for support</p> <p>Contact the PHE Health Protection Team (0113 386 0300)</p>	
		4 x 4 = 16	<p><b>12. Contain any outbreak by following local health protection team advice</b></p> <p>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. You should call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if any 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. 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>You can reach them by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.</p> <p>Contact the Trust Covid Operations team for support</p>	2 4 = 8
		3 x 4 = 12	<p><b>13. School Workforce</b></p> <p>Due to the continuing prevalence of coronavirus (COVID-19) infections in the community and re-introduction of shielding measures from 5th January 2021, we need to</p>	<p>Staff who are considered to be clinically extremely vulnerable (CEV) to work from home from 05.01.21 until a change in national guidance. If unable to work from home, they are not to come into</p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
			<i>continue to protect staff with medical vulnerabilities / living with vulnerable people.</i>	<p>work.</p> <p>School leaders are best placed to determine the workforce that is required in school, taking into account the updated advice.</p> <p>The expectation is that those staff not attending school who are still able to work should do so from home where possible. Some roles, such as some administrative roles, may be conducive to home working, and school will consider what is feasible and appropriate. Staff who are not pupil facing/directly operational to work from home wherever possible.</p> <p>Staff who are considered to be clinically vulnerable have an up to date, reactive risk assessment for working in school (including diabetic and asthmatic staff). Where schools apply the full measures in this guidance the risks to all staff will be mitigated significantly, including those who are clinically vulnerable (CV). We expect this will allow most CV staff to return to the workplace, although we advise those in the most at risk categories to take particular care whilst cases in the community remain high. Follow HR guidance to undertake or update individual risk assessments of those in a CV group and those who request a risk assessment (due to anxiety or for any other reason). These staff should be considered if there is a school outbreak in any bubble/local lockdown.</p>	
		<b>3 x 5 = 15</b>	Protect pupils with clinical vulnerabilities	<p>The parents of pupils with vulnerabilities should seek medical advice before the pupil attends school.</p> <p>The above must be clearly communicated to (and discussed with if necessary) to all parents.</p> <p>These pupils should be considered if there is a school outbreak in any bubble/local lockdown.</p>	<b>2 x 5 = 10</b>
		<b>4 x 4 = 16</b>	Minimise office use by staff, and social distancing applied when they must be used.	<p>If office staff are needed in the building they should maintain social distancing in the office (2m, or 1m with risk mitigation where 2m is not viable). This will mean some desks cannot be used, or changes to office layouts will be required.</p> <p>Hot-desking is also to be avoided. If it cannot be avoided the desk, phone and IT equipment etc. should be cleaned down <b>after</b> use and <b>before</b> use (with appropriate cleaning products). No personal</p>	<b>2 x 4 = 8</b>

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>belongings what so ever should be left on a desk which will be used for hot-desking.</p> <p>Follow Government guidance for Office Workers:  <a href="https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres">https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres</a></p>	
		<b>3 x 4 = 12</b>	<p>Visitors, agency staff, peripatetic teachers  <i>Schools can continue to engage supply teachers and other supply staff during this period.</i></p>	<p><i>Supply teachers, peripatetic teachers and/or other temporary staff can move between schools. They should ensure they minimise contact and maintain as much distance as possible from other staff. Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual. Schools should consider how to manage other visitors to the site, such as contractors, and ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors.</i></p> <p>Only essential visitors to be allowed by appointment only. Records to be kept of who has been on site and who they had contact with. Due to reducing the amount of people coming into school we are temporarily stopping any student placements, this is students from all settings, health, colleges and other schools. We are asking all visitors to wear either a face mask or face shield when entering the building. Due to health issues some visitors are exempt from wearing these items, in this instance the visitor is reminded that they must keep at least 2 metre distance from other staff and children when visiting our school. School staff will be informed that a visitor will be coming into school without face protection on and they will be reminded that it is also their responsibility to ensure they also keep a safe 2 metre distance.</p>	<b>2 x 4 = 8</b>
		<b>3 x 4 = 12</b>	<p>Dilute the concentration of any air-borne virus in a building.</p>	<p>Ensure ventilation is kept to a maximum. (artificial or natural). Set heating/ventilation systems accordingly, open windows. Staff/pupils to wear warm clothing (if necessary) to facilitate this.</p>	<b>2 x 4 = 8</b>
		<b>3 x 4 = 12</b>	<p>Keep equipment separate / clean between uses.</p>	<p>For individual and very frequently used equipment, such as pencils and pens, staff and pupils should have their own items.</p> <p>Classroom based resources, such as books and games, can be used and shared within the bubble.</p> <p>These should be cleaned regularly, along with all frequently touched surfaces.</p>	<b>2 x 4 = 8</b>



What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>Resources that are shared between classes or bubbles, such as sports, arts, and science equipment should be cleaned frequently.</p> <p>When sharing equipment between different bubbles, you should either:</p> <ul style="list-style-type: none"> <li>• clean it before it is moved between bubbles</li> <li>• allow them to be left unused for a period of 48 hours (72 hours for plastics)</li> </ul> <p>Minimise soft furnishings and soft toys as far as is possible, and spray down with the pink fluid at the end of the day</p> <p>Avoid sharing IT equipment or practical equipment; consider assigning it to named individuals if this is not possible all items must be cleaned down after use.</p> <p>Wash any equipment that is going to be used by different pupils or groups of pupils between uses. Use a chlorine based product. (Take care when washing IT/Electrical equipment - try to use a preparatory product designed to clean such equipment and never allow ingress of fluids into the equipment).</p> <p>Avoid sending any resources home with pupils or staff that are shared.</p> <p>Minimise the number of handouts/printouts</p>	
		<b>4 x 4 = 16</b>	<p><b>14. Travel to School/ Educational Trips - Encourage parents and pupils to follow guidance on safe travel.</b></p> <p>Only one parent should accompany children who need accompanying.</p> <p>Travel should be by foot or bike if possible.</p>	<p>Promote active travel</p> <p>Contact travel providers and discuss what precautions / risk assessments they have in place. Encourage:</p> <ul style="list-style-type: none"> <li>• Bubbles sitting together</li> <li>• Handwashing/sanitising before getting on and after getting off</li> <li>• Pupils wearing a face covering on the bus</li> </ul> <p>No school trips to take place as recommended in DfE guidance.</p>	<b>3 x 4 = 12</b>
		<b>3 x 4 = 12</b>	<p><b>15. Evacuation / Invacuation protocols – consider how to manage both evacuation and invacuation.</b></p>	<p>Marked zones are in the car park area, which are 2m away from each other.</p> <p>Bubbles to use alternative fire escapes where possible.</p> <p>Fire drills to be carried out immediately after the Spring Bank Holiday (unless inappropriate in the context of Government</p>	<b>2 x 4 = 8</b>

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<p>guidance).</p> <p>Try to achieve social distancing, as far as is reasonably practicable, in an emergency.</p> <p>Invacuation drills only to be undertaken when school is satisfied that local infection rates are low and restrictions are such that they can happen safely.</p> <p>Advice will be sought from the Trust Compliance Officer as appropriate</p>	
Staff physical and mental wellbeing adversely affected	A	3 x 3 = 9	16. Consider staff wellbeing.	<p>Available resources and wellbeing activities publicised to staff.</p> <p>Room Audit Carried out to ensure we are providing safe areas for staff during lunch (see list under lunches) and PPA.</p> <p>The following rooms will be used for staff PPA</p> <p>Orange – Gemma’s office</p> <p>Purple – Small meeting room</p> <p>Red – Physio room</p> <p>Yellow – Conference room</p> <p>Blue – PPA room</p> <p>Green – PPA in food tech room</p> <p>To ensure these rooms are only used by the correct bubbles the photocopier from within the PPA room will be relocated to a more central location.</p>	2 x 3 = 6
Children’s physical and mental wellbeing adversely affected	E	3 x 3 = 9	17. Consider pupil wellbeing	<p>Use of recovery curriculum.</p> <p>Phased return for pupils identified as excessively anxious.</p>	2 x 3 = 6
First Aid Guidance from the HSE – Rescue Breaths		3 x 4 = 12	18. The HSE have issued revised guidance for First Aid in the workplace.	<p>Try to assist at a safe distance from the casualty as much as you can and minimise the time you share a breathing zone, (2m if possible) as much as they can.</p> <p>If they are capable, tell them to do things for you, but treating the casualty properly should be your first concern. Remember the 3P model – preserve life, prevent worsening, promote recovery.</p> <p><b>Preserve life: CPR</b></p>	2 x 4 = 8

What are the hazards and What could happen	Affected persons groups	Risk rating if no action taken (see chart)	What are the base control measures	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (see chart)
				<ul style="list-style-type: none"> <li>• Call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms</li> <li>• Ask for help. If a portable defibrillator is available, ask for it</li> <li>• Rescue breaths must not be administered to those requiring CPR</li> <li>• Only deliver CPR by chest compressions and use a defibrillator (if available)</li> <li>• Before starting CPR, to minimise transmission risk, use a cloth or towel to cover the patient’s mouth and nose, while still permitting breathing to restart following successful resuscitation</li> <li>• If available, use: <ul style="list-style-type: none"> <li>○ a fluid-repellent surgical mask</li> <li>○ disposable gloves</li> <li>○ eye protection</li> <li>○ apron or other suitable covering</li> </ul> </li> </ul> <p><b>Prevent worsening, promote recovery: all other injuries or illnesses</b></p> <ul style="list-style-type: none"> <li>• If you suspect a serious illness or injury, call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms</li> <li>• If giving first aid to someone, you should use the recommended equipment listed above if it is available</li> <li>• You should minimise the time you share a breathing zone with the casualty and direct them to do things for you where possible</li> </ul> <p><b>After delivering any first aid</b></p> <ul style="list-style-type: none"> <li>• Ensure you safely discard disposable items and clean reusable ones thoroughly</li> <li>• Wash your hands thoroughly with soap and water or an alcohol-based hand sanitiser as soon as possible</li> </ul>	