

**Oakwood Primary School
Covid-19 Risk Assessment
School Reopening 8 March 2021**

Name of persons filling out this assessment: Maria Whitmarsh, Becky Vanes

Date of completion: February 2021

Review date: Weekly

Date of review by governing body: March 2021 and then monthly

Weekly reviews:

- 11/03/21
- 18/03/21
- 25/03/21
- 19/04/21
- 23/4/21
- 30/4/21
- 7/6/21
- 22/6/21
- 6/7/21

When assessing risk, leaders and governors must use professional judgement and seek further advice as appropriate. We recommend that settings use the following formulae to identify risks and to formulate appropriate countermeasures.

Impact x Likelihood = Risk

Impact	Score	Health and safety effect
Critical/ Catastrophic	5	Multiple deaths of employees, service users, members of the public, etc.
Major	4	Death of an employee, service user, member of the public, etc.
Moderate	3	Serious injury (acute, chronic or life-changing) to employee, service user or member of the public requiring medical intervention.
Minor	2	Minor injury such as a bump or bruise that may require First Aid treatment and the person returns to work.
Insignificant/ Negligible	1	A day to day issue/problem but negligible harm would result.
Likelihood	Score	Expected frequency
Almost Certain	5	Reasonable to expect that the event WILL undoubtedly happen/recur, possibly frequently and is probable in the current year

Probable / Likely	4	Event is MORE THAN LIKELY to occur, will probably happen/recur, but is not a persisting issue. Will possibly happen in the current year and be likely in the longer term
Possible	3	LITTLE LIKELIHOOD of event occurring. Not likely in the current year, but reasonably likely in the medium/long term.
Unlikely	2	Event NOT EXPECTED. Do not expect it to happen/recur. Extremely unlikely to happen in the current year, but possible in the longer term.
Very Unlikely /Rare	1	EXCEPTIONAL event. This will probably never happen/recur. A barely feasible event.

Level of Risk	Over all Rating	How the risk should be managed
HIGH RISK	15-25	Immediate Management Action
MEDIUM RISK	9-12	Plan for Change
LOW RISK	1-8	Continue to Manage

Overall risk rating: Impact x Likelihood = Risk						
Likelihood	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	13	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
		Impact				

When completing this document we have taken into account the following guidance from the Department for Education:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/963541/Schools_coronavirus_operational_guidance.pdf

System of controls

This is the set of actions schools must take according to the DfE operational guidance for schools (February 2021). They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the sections below.

Prevention:

- 1) minimise contact with individuals who are required to self isolate by ensuring they do not attend school
- 2) ensure face coverings are used in recommended circumstances
- 3) ensure everyone is advised to clean their hands thoroughly and more often than usual
- 4) ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach
- 5) maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents
- 6) consider how to minimise contact across the site and maintain social distancing wherever possible
- 7) keep occupied spaces well ventilated

In specific circumstances

- 8) ensure individuals wear the appropriate personal protective equipment (PPE) where necessary
- 9) promote and engage in asymptomatic testing, where available

Response to any infection:

- 10) promote and engage with the NHS Test and Trace process
- 11) manage and report confirmed cases of coronavirus (COVID-19) amongst the school community
- 12) contain any outbreak by following local health protection team advice

Our risk assessment takes into account the latest government guidance from February 2021 and includes the suggestions made by the DfE, as well as the previous risk assessment drawn up when children returned to school in September 2020. We have adapted and amended this to fully identify and reduce the risks to pupils and staff presented by Covid-19. The sections that are populated below include only Covid-19 associated risks. We have incorporated additional elements of their risk assessment process to include guidance on managing the site, remote teaching/working and some specific elements of safeguarding.

What are the hazards?	Who might be harmed and how?	Overarching control measures	Planned, additional control measures. (what else are you going to do?)	Who is responsible for enacting these measures?	When will they be completed by?	Impact score	Likelihood score	Risk score
Contact with individuals who have been required to self isolate	Pupils, staff and visitors. Risk of CV19 infection.	Prevention 1. Minimise contact with individuals who are required to self-isolate We already have clear procedures for minimising such contacts.	<p>Pupils, staff and other adults must not come into the school if:</p> <ul style="list-style-type: none"> • they have one or more coronavirus (COVID-19) symptoms • a member of their household (including someone in their support bubble or childcare bubble if they have one) has coronavirus (COVID-19) symptoms • they are required to quarantine having recently visited countries outside the Common Travel Area • they have had a positive test <p>They must immediately cease to attend and not attend for at least 10 days from the day after:</p> <ul style="list-style-type: none"> • the start of their symptoms • 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) <p>Anyone told to isolate by NHS Test and Trace or by their public health protection team has a legal obligation to self-isolate, but you may leave home to avoid injury or illness or to escape risk of harm.</p> <p>If anyone in school develops a new and continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia)</p> <ul style="list-style-type: none"> • they must be sent home to begin isolation - the isolation period includes the day the symptoms started and the next 10 full days • they will be advised to follow the guidance for households with possible or confirmed coronavirus (COVID-19) infection • they will be advised to arrange to have a test as soon as possible to see if they have coronavirus (COVID-19) Other members of their household (including any siblings and members of their support or childcare bubble if they have one) should self-isolate. Their isolation period includes the day symptoms started for the first person in their household, or the day their test was taken if they did not have 	MW Everybody has a responsibility to inform MW if they have symptoms or have come into contact with anyone who has symptoms	Every day dynamic risk assessment	5	3	15

			<p>symptoms, whether this was a Lateral Flow Device (LFD) or Polymerase Chain Reaction (PCR) test), and the next 10 full days. If a member of the household starts to display symptoms while self-isolating they will need to restart the 10 day isolation period and book a test. If anyone tests positive whilst not experiencing symptoms but develop symptoms during the isolation period, they must restart the 10 day isolation period from the day they developed symptoms.</p> <p>Any member of staff who has provided close contact care to someone with symptoms, regardless of whether they are wearing PPE, and all other members of staff or pupils who have been in close contact with that person, do not need to go home to self-isolate unless:</p> <ul style="list-style-type: none"> • the symptomatic person subsequently tests positive • they develop symptoms themselves (in which case, they should self-isolate immediately and arrange to have a test) • they are requested to do so by NHS Test and Trace or the Public Health England (PHE) advice service (or PHE local health protection team if escalated) • they have tested positive from an LFD test as part of a community or worker programme <p>Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned after they have left, to reduce the risk of passing the infection on to other people. If you are contacted by NHS Test and Trace or your local health protection team and told to self-isolate because you have been a close contact of a positive case, you have a legal obligation to do so.</p> <p>If a pupil is awaiting collection:</p> <ul style="list-style-type: none"> • they will be moved, where possible and preferably around the outside of the building, to the Inclusion Room where they can be isolated behind a closed door to the front office area, with the side door leading to the back of the KS1 hall left open, depending on the age and needs of the pupil, with appropriate adult supervision if required • a window will be opened for fresh air ventilation if it is safe to do so • if it is not possible to isolate them, they will be moved 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 will be able to use the staff 'gents' toilet at KS1 - the toilet will then be marked as 'out of action' until it has been thoroughly cleaned by a member of staff wearing PPE. It must be cleaned and disinfected using standard cleaning products before being used by anyone else • 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) • adults collecting symptomatic children must also collect any siblings in school. They will be asked to collect their child(ren) from the KS1 side entrance (from the hall). 	<p>First aider or member of SLT to move child to isolation room. This person should wear PPE if distancing is not possible.</p>	<p>Every day dynamic risk assessment</p>	<p>5</p>	<p>3</p>	<p>15</p>
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<p>Covid-19 is spread through droplets in the air</p>	<p>Staff and visitors</p>	<p>Prevention 2. Ensure face coverings are used in recommended circumstances.</p>	<p>NOTE: Government guidance states clearly that children in primary schools do not need to wear a face covering.</p> <p>Face coverings must be worn by staff at all times unless these are a hindrance to effective teaching and learning or effective communication within your role.</p> <p>Adult visitors to our school site, including parents, must wear a face covering on the premises. Signage on school fencing and gate areas reminds people of the expectation.</p> <p>NOTE: Face visors or shields should not be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in reducing aerosol transmission when used without additional face covering.</p> <p>Some individuals are exempt from wearing face coverings and the latest guidance must be followed in this regard.</p> <p>The school keeps a supply of face coverings for use by staff and adult visitors. Hands should be washed before and after changing a face covering. Reusable coverings should be taken home daily and washed.</p> <p>Face coverings must either be disposed of in the bodily fluids bin in the school medical room or in a regular black bagged bin if they are disposed of in a sealed bag. They should be stored safely in individual, sealable plastic bags between use.</p> <p>Face covering boxes to be stored in staff spaces to enable free access</p>	<p>All adults in school share responsibility for ensuring this happens</p>	<p>Every Day</p>	<p>3</p>	<p>3</p>	<p>9</p>
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<p>Insufficient hygiene processes could result in spread of virus</p>	<p>Pupils, staff and visitors. Risk of CV19 infection.</p>	<p>Prevention 3. Everyone is advised to clean their hands thoroughly and more often than usual</p>	<p>Ensure that pupils clean their hands and sanitise regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating and using the toilet. Regular and thorough hand cleaning is going to be needed for the foreseeable future.</p> <p>Points to consider and implement:</p> <ul style="list-style-type: none"> • We have enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly • Supervision of hand sanitiser use given risks around ingestion. Small children and pupils with complex needs should continue to be helped to clean their hands properly. Skin friendly skin cleaning wipes can be used as an alternative • Building these routines into school culture, supported by behaviour expectations and helping ensure younger children and those with complex needs understand the need to follow them <p>Children have permission to have their own, small bottle of hand sanitiser (60-95% alcohol content) which can be kept on their desk. We expect them to use it sensibly, and for their own personal use. We will remove it from children who are not behaving in a sensible way with it. We can fill up empty bottles from our own supply.</p> <p>Year 5 will be cooking as part of their DT in summer term. They will use the KS2 pupil kitchen which is also being used as the Y5 staffroom so keeps all areas within their bubble. Normal hygiene practices around cooking will apply - wash hands regularly, don't touch faces, disinfect surfaces before food preparation, between groups and at the end of the session. Windows to shared area by KS2 playground to be opened.</p>	<p>All adults in our school share responsibility for ensuring that this happens</p> <p>AH/Cleaning team to ensure stocks of sanitisers, paper towels and soap are replenished</p>	<p>Every day dynamic risk assessment</p>	<p>3</p>	<p>3</p>	<p>9</p>
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<p>Poor respiratory hygiene increases the likelihood of infection</p>	<p>Pupils, staff and visitors. Risk of CV19 infection.</p>	<p>Prevention 4. Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach</p>	<p>There will be good stocks of tissues in all rooms. Staff to alert the onsite team if there are reducing stocks. Children will be regularly reminded to follow the 'catch it, bin it, kill it' approach.</p> <p>Ensure that we have enough tissues and lidded bins available in the school to support pupils and staff to follow this routine. As with hand cleaning, we must ensure younger children and those with complex needs are helped to get this right, and all pupils understand that this is now part of how school operates.</p> <p>Public Health England does not recommend the use of face coverings by children in primary 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.</p>	<p>AH to make sure stocks of tissues are replenished at all times</p>	<p>Every day dynamic risk assessment</p>	<p>3</p>	<p>3</p>	<p>9</p>
<p>Insufficient cleaning processes could result in spread of virus from contact points</p>	<p>Pupils, staff and visitors. Risk of CV19 infection.</p>	<p>Prevention 5. Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents</p>	<p>We continue to supplement our own cleaning team with contracted cleaners, who all have allocated areas of the building.</p> <p>There is a cleaning schedule that ensures cleaning is generally enhanced and includes:</p> <ul style="list-style-type: none"> - more frequent cleaning of rooms / shared areas that may be used by different groups (e.g. our hall) - frequently touched surfaces being cleaned more often than normal <p>Toilets are cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet</p> <p>We have a regular contracted cleaner who cleans for an additional 2 hours in the middle of the day, focusing on toilets, desks, chairs and touch points. She also checks stocks and replenishes where necessary.</p> <p>Our recently appointed site manager is now onsite all day, meaning that any cleaning issues can be rectified immediately.</p> <p>Each working space has a supply of wipes, gloves, masks, aprons, spray cleaners and cloths. This is checked by the cleaners daily.</p> <p>As well as daily cleaning by the cleaners, including the midday supplementary cleaning, staff should wipe down surfaces and touch points regularly.</p> <p>ICT equipment allocation</p>		<p>Every day dynamic risk assessment</p>	<p>4</p>	<p>3</p>	<p>12</p>

			<p>ICT designation:</p> <p>Y6 - ICT suite Thursday & Friday (Wednesday deep clean) Y5 - ICT suite Monday & Tuesday</p> <p>Y4 - Chrome books Y3 - Chrome books</p> <p>Y2 - ipads (numbers tbd) Y1 - ipads (numbers tbd)</p> <p>YR - ipads (numbers tbd)</p> <p>Chromebooks should be off and left to dry before closing and putting on charge. Wipes will be provided for each year group. Y5 and Y6 must bring their wipes with them to the ICT suite and not to leave any with them. After wiping computers wipes should be disposed of in the bin. CT must check that the ICT suite is left in a clean and tidy condition.</p> <p>ICT suite will be reopening for KS2 children as of 8/6/21. A full timetable will be produced by the onsite team. Wipes will be provided for each year group. Classes must bring their wipes with them to the ICT suite in order to wipe down equipment after use. All wipes should be disposed of in the bin. CT must check that ICT suite is left in a clean and tidy condition. Midday cleaner to be redirected to clean the ICT suite as part of the daily top up cleaning.</p> <p>Wipes are kept by the photocopiers and should be used before and after photocopier use.</p> <p>Ensure all workstations and equipment are thoroughly cleaned with antibacterial wipes before each use, even if it was used by the same person the day before. This includes the desk surface, keyboard, mouse and telephone handset and buttons, including the mouth and ear pieces.</p> <p>Avoid hot-desking, use the same desk each time where possible. Maintain social distancing, i.e. use every other desk not adjacent or opposite desks where possible. If it is necessary to use another colleague's desk, make sure that you have thoroughly wiped down all touchpoints (keyboard, screen, buttons, mouse, mouse pad, desk, chair, telephone) with antibacterial wipes after use. Make sure the person knows you have used their desk and this person must also wipe down the same touch points before use.</p> <p>Printers and photocopiers – wipe printer buttons with antibacterial wipes before touching. Avoid queuing to use the printer if possible but if you need to queue, observe social distancing at all times.</p>					
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			<p>Parents are asked to send children with a clean, full water bottle in the morning. Water will be available at lunchtime. Where bottles need refilling, we will do so from a single jug that has been filled from the cooler.</p> <p>All adults should check their supplies daily and should email Aaron (site manager) immediately to let him know. Checking frequently will mean that supplies can be topped up when they are running low, rather than after they have run out.</p> <p>Children to have their own daily equipment in their own named pencil case. Children to keep their equipment in a tray on or under their desk or in a system decided by the classteacher.</p> <p>Classroom resources can be shared but must be cleaned thoroughly or quarantined before being used by a different year group bubble.</p> <p>Resources that are shared between classes or bubbles, such as sports, art and science equipment will 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. The last person to use the equipment must be responsible for cleaning it before it moves to another bubble use.</p> <p>The library will remain closed for the first few weeks of term.</p> <p>Children should limit the items they bring into school. If they wish to bring a bag, they can, but ideally as small as possible. All KS2 children have lockers for storage, although children will be discouraged from visiting lockers during the day - all equipment will be kept in trays in the classroom. KS1 children have pegs, so ideally should only have a coat and book bag.</p> <p>Climbing frames will be out of action.</p> <p>Front doors need to be kept shut throughout the day. Where possible, office staff to open them from inside office. If button needs to be used, staff should sanitise hands before touching the button.</p> <p>When 'top up cleaning' of surfaces throughout the day, spray and cloths should be used rather than wipes. Wipes should be reserved for wiping down equipment.</p>						
		<p>Prevention 6. Consider how to minimise contact across the site and maintain social distancing where possible</p>	<p>The overarching principle to apply is reducing the number of contacts between children and staff. This is achieved in our school through keeping classes separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and</p>	<p>All staff have a shared responsibility to ensure</p>	<p>Every day dynamic risk assessment</p>	3	3	9	

			<p>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 feasibility of keeping distinct groups separate while offering a broad curriculum <p>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>The school building makes class-sized bubbles extremely difficult to maintain, particularly in Year R and KS1 where pupils are in open plan bases.</p> <p>We need to balance the need for maintaining small and consistent groups with the emotional and academic well-being of the children too. In order to facilitate good levels of adult support, we will have year group bubbles, but aim to separate the children into smaller group sizes of around 20 children for the majority of the time (staff availability allowing). This means we can distance between pupils to a greater degree for a lot of the time, (although 2m distancing will always be impossible in a primary school setting) and it also enables a smaller pupil:adult ratio, helping us to facilitate targeted teaching. We will review this from a logistical and financial viewpoint at the end of the spring term.</p> <p>Each group of pupils will have their own allocated space in school as follows:</p> <p>Year R - Year R base to enable continuous provision. There will be increased focus on outdoor learning.</p> <p>Year 1 - Willow class to be screened into two smaller areas. A supply teacher will be in for at least four weeks while one class teacher is shielding. This class teacher will be able to remote in for one of the groups, supported in class by the TA.</p> <p>Year 2 - A supply teacher will be in for at least four weeks while one class teacher is shielding. This class teacher will be able to remote in for one of the groups, supported in class by the TA. The third part of the base will be used as a more permanent teaching space. Shielding teacher has returned. We still have the supply teacher in to reduce group sizes and to provide additional support until 7/5/21.</p> <p>Year 3 - One group will use the Rainbow Room for the majority of the day.</p> <p>Year 4 - One group will use the Music Room for the majority of the day.</p> <p>Year 5 - one group will use the Studio for the majority of the day with a supply teacher for at least 4 weeks. Children are back into 2 classes as of 4/5/21</p> <p>Year 6 - this year group is already in smaller class sizes.</p> <p>All year groups are encouraged to learn outdoors as much as possible.</p>	<p>contact between individuals is minimised through effective social distancing at all times</p> <p>Onsite team</p>				
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			<p>Where room size allows, desks will be forward facing, either with children sat in twos or in rows. This may mean horseshoe shape arrangements in some classes. We have resumed the small group tables in some classes as the rows were hindering effective teaching and learning. For Year R, there will not be desks and provision will continue as normal, but with mindful attention paid to the limiting and rotation of resources.</p> <p>Each year group has an allocated space on the playground.</p> <p>Pupil toilets: YR, 1 and 2 will continue to use the appropriate toilets within the base. Y3 to use the Girls' toilets Y4 to use the Boys' toilets Y5 to use the Y5/6 toilets. Y6 to use the locker room toilets. As bubbles have their own toilets, a 1 in 1 out system is not needed. However, numbers of children in the toilets at any one time should still be strictly limited to avoid overcrowding. 2 children at one time should be the maximum. (11/3/21) Issues with some boy/girl crossover in Y4 toilets with boys using urinals while girls are present. Urinals to be taped off not to be used. Children to be reminded of the 2 in at a time system. Staff to monitor (19/04/21)</p> <p>Movement around school is limited as much as possible. Lunches will be eaten in classrooms, with the exception of Year R who will eat in the small KS1 hall (entering via the outside door).</p> <p>ICT suite is limited to Year 5 and 6 (Mon and Tues for one year group, deep clean on Weds and Thurs and Fri for the next year group).</p> <p>Library to be closed for final few weeks of term as cases are on the rise and it is one of the few areas that have frequent 'touch points' that are difficult to clean.</p> <p>Staff break spaces are spread across the building, and only to be used by one year group. Year R - Showcase Office Year 1 - Acorn room Year 2 - section of Year 2 base Year 3 - Rainbow Room kitchen Year 4 - Staff room Year 5 - KS2 pupil kitchen Year 6 - Conference room TMC - allocated space in staff room (11/3/21) Kidzplay use small hall to make drinks before children arrive. (11/3/21)</p> <p>We will move to staggered use of some staff spaces to enable more comfortable breaktimes. Staff must continue to distance when</p>	Onsite team				
				All staff				
				All staff				
				All staff				
				SLT				
				BV				

			<p>occupying shared spaces, wipe down their areas after use, and be responsible for the cleaning of their own crockery and cutlery.</p> <p>Renewed allocation: Year R - Showcase Office Year 1 - Acorn Room Year 2 - Staff Room Year 3 - Rainbow Room Kitchen Year 4 - Staff Room Year 5 - Conference Room Year 6 - Conference Room</p> <p>Senior leadership distribution. Head and Deputy will remain based in the Hub. ZR (AHT) to use Inclusion Office (this is also the isolation room, but will be vacated in the event of being required) TM (AHT) to use Business Manager desk Thursday and Friday. Business manager to work from home on these days. Strict cleaning protocols around desk sharing to be followed (see cleaning section).</p> <p>SLT will resume working at their usual desks, continuing to maintain distance and wearing masks when walking round the room.</p> <p>Although Government guidance states: <i>"All teachers and other staff can operate across different classes and year groups to facilitate the delivery of the timetable and specialist provision"</i> we are minimising this even further than previously. Teachers and TAs will be allocated to a year group, and will remain there wherever possible. The exceptions to this are:</p> <ul style="list-style-type: none"> • TMC coaches - they will continue to provide specialist PE provision across the school. We have worked with TMC to ensure we have the same coaches in school consistently, so they are not crossing between schools. <i>On occasion, to cover TMC staff absence, we may be allocated a different coach who has recently worked at a different school. All TMC coaches follow TMC risk assessment as well as our own, take Lateral Flow Tests twice weekly, and maintain distancing wherever possible. (11/3/21)</i> • ELSA - in order to best support children with emotional and social needs, the ELSA needs to be able to work with children across the school. Where possible, these interactions will take place outside. Where this is not possible, they will take place side by side. • SLT support - SLT are sometimes required to assist with behavioural or emergency issues. Where possible and safe to do so, SLT will approach from the external classroom doors. <p><i>* In cases of staff absence where additional adults may be required to support cover. Eg if a year group does not have enough staff to run safely, or if a child with an EHCP needs support due to 1:1 staff absence.</i></p>					
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Leadership staff, including subject leaders, will be in classrooms more in order to facilitate monitoring and evaluation activities. They must wear masks and distance wherever possible.

If staff need to be contacted during the day, they should either be rung on their mobile or nearby school phone, or emailed in less urgent cases. If staff are passing a message regarding a child, phone rather than text to make sure the message has been received. (11/3/21)

Staff toilets will continue operating on a one-in-one-out basis with signage to support this. In order to reduce queuing and waiting times. The following areas are allocated:

Gents - KS2 gents
 Ladies - SLT to use KS1 gents
 Year R/KS1 staff to use KS1 ladies
 KS2/Office staff to use KS2 ladies or the therapy suite

Breaktimes
 As most year groups have access to their own part of the playground, these do not need to be staggered. The only exception is year 5 and 6 who are rotating between them.

Lunchtimes
 Children will eat in classrooms with their teachers supervising. Year R will eat in the small KS1 hall. Playtime will be supervised by TAs, TMC and lunchtime staff - each staff member is allocated to a year group bubble. Kitchen staff and Lunchtime Supervisors will deliver food. Lunchtimes will be staggered as follows:

Year	Eating time	Playtime
R	11.50 - 12.20	YR team
1	12.00 - 12.30	Year 1 team, CD
2	12.15 - 12.45	SW HP
3	12.30 - 1.00	VP TMC ZB AD MP
4	12.00 - 12.30	12.30 - 1.00 TMC AD MP
5	12.30 - 1.00	12.00 - 12.30 EW WP SR
6	12.15 - 12.45	12.45 - 1.15 TMC TD WP SR

			<p>Drop off We will continue with the 'soft opening' in the morning, allowing pupils to arrive from 8.40 onwards with registration at 9.00. This was extremely successful in reducing footfall onsite in the autumn term.</p> <p>Collection In order to accommodate families with siblings, we are staggering the finish times according to Houses. Azura and Adonia - 3pm Britannia and Ventura - 3.15pm Parents will be asked to collect younger siblings first, helping us to maintain a free flow of people around the grounds. Pupils who live locally in Years 5 and 6 will be encouraged to walk home - parents must write to the class teacher giving written permission. These children will leave at 3pm.</p> <p>We are opening three additional gates - one opposite Year 3 classrooms, one by the field from the KS2 playground and one behind Year R to reduce bottlenecks on the playground.</p> <p>No assemblies are held with more than one group of pupils. All assemblies and collective worship is held remotely, delivered in classrooms.</p> <p>First aid kits continue to be in classrooms for minor first aid issues. If a child is unwell with Coronavirus symptoms, they should follow the steps outlined in the previous section. If a pupil is unwell for other reasons (eg sickness) they should be escorted (round the outside of the building where it is possible and safe to do so) to the main office where they will wait in the medical room for collection.</p> <p>Lunchtime staff can access their bubble's classroom to collect first aid kits. Most minor first aid at lunchtimes can be dealt with by lunchtime staff. If they are in any doubt, or if the injury is more serious, the child should be sent or taken to the office for a second opinion. Louise Moody is a trained first aider and can offer second opinions in any case. (11/3/21)</p> <p>Parents are asked not to speak with teachers in the morning, but to email directly with any urgent messages</p> <p>Parents are reminded to call or email the office with any queries. If they need to visit the office for a specific reason, then it is a one-in-one-out system.</p> <p>Parents are asked to limit footfall onsite by dropping off and collecting by one adult only. Older siblings should not be onsite too.</p> <p>Staff meetings and meetings with outside agencies and parents will continue to take place remotely wherever possible.</p>					
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Good ventilation reduces the concentration of the virus in the air	Pupils, staff and visitors. Risk of CV19 infection.	Prevention 7. Keep occupied spaces well ventilated	<p>Ensure that windows are open just enough to provide constant background ventilation and opened more fully during breaks or when children are out of the room (during PE for example) to purge the air in the space. Keep internal doors open where possible to create a throughput of air.</p> <p>Ensure that fire doors are not held open without the proper use of door openers that are part of the fabric of the building.</p> <p>Bear in mind that especially in cooler weather, children and adults need to be comfortable in class and heating should also be used as necessary to ensure comfort levels are maintained in occupied spaces.</p> <p>Roof windows should be opened during the day.</p>	All staff have a responsibility to make sure spaces are well-ventilated	Every Day dynamic risk assessment	3	3	9

<p>Unavoidable, direct contact leads to the spread of infection.</p>	<p>Pupils and staff</p>	<p>8. Ensure individuals wear appropriate personal protective equipment (PPE) where necessary</p> <p>NOTE: Face coverings are not classified as PPE.</p> <p>9. Promote and engage in asymptomatic testing</p>	<p>The majority of staff 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 only then if a distance of 2 metres cannot be maintained - 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 (we currently do not have this situation in school) - performing aerosol generating procedures (AGPs) <p>Senior staff will understand and implement 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>Continue to participate in the NHS and government backed asymptomatic testing process for primary school staff</p> <p>See separate assessment at the end of this document.</p>	<p>AH to ensure that stocks of PPE are replenished for the use of first responders in certain circumstances and in cases where intimate care is provided to children</p> <p>BV to ensure that stocks of test kits are replenished when required</p>	<p>Dynamically risk assessed at all times</p>	<p>3</p>	<p>3</p>	<p>9</p>
<p>Infections identified in school spread to the wider community.</p>		<p>10. Promote and engage with the NHS Test and Trace process</p>	<p>All leaders 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> <p>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, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit</p> <p>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</p> <p>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> <p>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>We adhere to all of this advice.</p> <p>MW to communicate this to parents in return to school newsletter</p>		<p>3</p>	<p>3</p>	<p>9</p>

			<p>We have been provided with a small number of home testing kits that can be given directly to parents/carers collecting a child who has developed symptoms at school, or staff who have developed symptoms at school, where they think providing one will significantly increase the likelihood of them getting tested. Advice will be provided alongside these kits.</p> <p>Schools should ask parents and staff to inform them immediately of the results of a test:</p> <p>if someone tests negative, they can stop self-isolating as soon as they are well and no longer have symptoms of Covid-19. 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.</p> <p>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 10 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 10-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 10 days. If they start to display symptoms while self isolating, they will need to re-start the 10 day isolation period and book a test.</p>						
Poor control measures lead to rapid infection across bubbles.		11. Manage confirmed cases of coronavirus (COVID-19) amongst the school community	<p>We take swift action when we become aware that someone who has attended has tested positive for coronavirus (COVID-19). Leaders contact the local health protection team through Southampton City Council. 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>Based on the advice from the health protection team, we 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. 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 	MW to communicate this to parents and the school community		3	3	9	

			<ul style="list-style-type: none"> - Travelling in a small vehicle, like a car, with an infected person <p>A template letter will be provided to schools, on the advice of the health protection team, to send to parents and staff if needed. Schools must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.</p> <p>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 self-isolate develops symptoms themselves within their 10-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 10-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 the school immediately, and must isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 10-day isolation period). Their household should self-isolate for at least 10 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>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. Further guidance is available on testing and tracing for coronavirus (COVID-19).</p>					
Poor communication with local public health officers lead to uncontrolled outbreaks.		12. Contain any outbreak by following PHE local health protection team advice	<p>If the school has two or more confirmed cases within 10 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, we may have an outbreak, and must continue to work with the 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. 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>	MW to communicate with local public health teams in such circumstances		3	3	9

			<p>In consultation with the local Director of Public Health, where an outbreak in 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> <p>Pupils or staff members who test positive can return to their normal routine and stop self isolating after they have finished their isolation period and their symptoms have gone or if they continue ONLY to have a residual cough or anosia. This is because those symptoms can last for several weeks once the infection has gone. If they still have a high temperature however, they must be advised to stay at home and seek medical advice.</p> <p>If a parent insists on their child continuing to attend school, the Headteacher can take the decision to refuse the pupil in order to protect other pupils and staff from possible infection. This decision would be considered carefully in the light of all circumstances and prevailing public health advice.</p>					
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<p>Clinically vulnerable staff and pupils are at greater risk of more serious illness if they contract Covid 19</p>	<p>CEV, CV staff and pupils and pregnant staff</p>	<p>CEV staff continue to work from home</p>	<p>Staff who are clinically extremely vulnerable CEV staff are now able to attend the workplace. Staff who are CEV will previously have received a letter from the NHS or their GP telling them this (no new letter is required), and there is guidance for everyone in this group. It provides advice on what additional measures individuals in this group can take. Employers should talk to their staff about how they will be supported, including to work from home where possible.</p> <p>Those living with someone who is CEV can still attend work where home-working is not possible and should ensure they maintain good prevention practice in the workplace and home settings.</p> <p>The shielding guidance is reviewed regularly. CEV individuals will be advised in advance of any extension or end date to inform them of changes or continuation of the guidance.</p> <p>CEV individuals (over 18) have been prioritised for vaccination in phase 1 before the general population and in line with the priority ordering set by the Joint Committee on Vaccination and Immunisation.</p> <p>Current DHSC guidance, informed by PHE, currently advises that CEV individuals should continue to shield even after they have been vaccinated. This may change as we get further data on the effects of vaccination.</p> <p>It is understood from growing evidence that many children identified at the start of the pandemic as clinically extremely vulnerable (CEV) are not at increased risk of serious outcomes from coronavirus (COVID-19) and children are gradually being removed from the shielding patient list (SPL) as appropriate following review with a clinician.</p> <p>The advice for pupils who have been confirmed as clinically extremely vulnerable is to shield and stay at home as much as possible until further notice. They are advised not to attend school while shielding advice applies nationally.</p> <p>All 16 to 18 year olds with underlying health conditions which put them at higher risk of serious disease and mortality will be offered a vaccine in priority group 6 of the vaccination programme.</p> <p>At present, these children should continue to shield, and self-isolate if they have symptoms or are identified as a close contact of a positive</p> <p>Staff who are clinically vulnerable CV staff can continue to attend school. While in school they must follow the system of controls to minimise the risks of transmission.</p>	<p>Staff must notify SLT if they are in any of the 'at risk' groups. Individual risk assessments will be carried out for any staff member who feels they need additional control measures above and beyond this generic risk assessment</p>	<p>3</p>	<p>2</p>	<p>6</p>
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			<p>One CEV member of staff is back working onsite after having had second vaccination, individual risk assessment in place.</p> <p>All CEV members of staff are now back working onsite following receipt of second vaccinations.</p> <p>Staff who live with those who are CV can attend the workplace but should ensure they maintain good prevention practice in the workplace and at home.</p> <p>Pregnancy We will follow the specific guidance for pregnant employees because pregnant women are considered CV. In some cases pregnant women may also have other health conditions that mean they are considered CEV, where the advice for clinically extremely vulnerable staff will apply. COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding contains vaccination advice.</p> <p>We already have workplace risk assessments which consider any risks to female employees of childbearing age and, in particular, risks to new and expectant mothers. If we are notified that an employee is pregnant, breastfeeding, or has given birth within the last 6 months, we will check the workplace risk assessment to see if any new risks have arisen. An assessment may help identify any additional action that needs to be taken to mitigate risks.</p> <p>Any risks identified at that point, or later during the pregnancy, in the first 6 months after birth, or while the employee is still breastfeeding, must be included and managed as part of the general workplace risk assessment. We will take appropriate sensible action to reduce, remove or control the risks.</p> <p>Staff who may otherwise be at increased risk Current evidence shows that a range of factors mean that some people may be at comparatively increased risk from coronavirus (COVID-19).</p> <p>Those at particularly high risk from a range of underlying health conditions should now have been included in the CEV group and will be receiving a letter to confirm this.</p> <p>For others who feel they may be at increased risk, where it is not possible to work from home, these staff can attend school as long as the system of controls set out in this guidance are in place. You should continue with an equitable approach to risk management for your workforce, recognising that staff may have a variety of baseline risks.</p>					
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			<p>Work continues to build our understanding of what these baseline factors are and the increased risks they pose.</p> <p>There is further information available on who is at higher risk from coronavirus.</p> <p>Staff who live with those who may have comparatively increased risk from coronavirus (COVID-19) can attend the workplace where it is not possible to work from home.</p>					
<p>Lateral Flow Testing of Staff Twice Weekly</p> <p>Staff member does not undertake the test</p> <p>Staff member does not undertake the test properly</p> <p>Staff member does not report result through Test & Trace</p> <p>As a result of positive test results, there are less staff in school</p> <p>We run out of tests</p> <p>Covid Co-ordinator becomes infected</p>	<p>Colleague could be positive and not know</p> <p>Result may be incorrect or void</p> <p>Colleagues in school and other close contacts</p> <p>Colleagues may need to attend work at short notice</p> <p>As we have over 1,100 tests, this is unlikely</p> <p>Covid Co-ordinat</p>	<p>9. Promote and engage in asymptomatic testing</p> <p>Staff are signing for their test kits and for the updated instructions they need.</p>	<p>Staff can opt in or out of the testing regime - it is completely voluntary. Staff who opt out must follow the guidance of the risk assessment.</p> <p>Staff who work full time test on Sunday and Wednesday evening each week. Staff who are part time, test the day before their first day in work.</p> <p>All staff participating have received full guidance to ensure they know exactly how to carry out the procedure. Covid Co-ordinator is on hand to support individuals if they have an issue.</p> <p>All colleagues are emailing the Covid Co-ordinator at the same time so we will know that everyone has complied with the instruction to log results with Test and Trace.</p> <p>Staff are now not emailing with negative results, they only make contact in the case of a positive result.</p> <p>Results are collected on the school recording system.</p> <p>System put in place to contact colleagues in such cases as early as possible</p> <p>Covid Co-ordinator to keep a close eye on test boxes and order more tests if we think that these may be needed</p>	<p>All Staff</p> <p>Individual staff member</p> <p>Covid Co-ordinat or and individual staff members</p> <p>BV and ZR</p> <p>Covid Co-ordinat or</p> <p>Covid Co-ordinat or</p> <p>Covid Co-ordinat or</p>	<p>Daily</p> <p>Twice Weekly</p> <p>Twice Weekly</p> <p>Twice Weekly</p> <p>Twice Weekly</p> <p>Twice Weekly</p> <p>Weekly</p>			

	or and close contacts		Use of PPE Limiting the amount of contact with colleagues Colleagues to wear face masks at all times	Covid Co-ordinator and individual colleagues	At all times			
Mental health could be adversely affected by lockdown and associated issues (eg isolation, illness, bereavement etc)	Staff and Pupils		<p>Staff</p> <ul style="list-style-type: none"> - Educational psychology support for all staff around bereavement and loss - Staff signposted to Education Support Charity - SLT Educational Psychology Supervision sessions - Regular check-ins with shielding staff from SLT and also with year team colleagues - Regular virtual whole staff meetings so that people can 'be together' whilst apart and can check in with each other - Onsite Team leading on snagging list to support with ongoing safety concerns - Weekly Risk Assessment reviews using staff feedback from Onsite Team to maintain safety standards - Return to work meetings as per absence procedures, with an appropriately flexible approach to phased returns for those people who need them <p>Pupils</p> <ul style="list-style-type: none"> - Safeguarding policy to be followed as usual - Social stories provided for children before return to school - Focus on PSHE (Mental and Emotional Wellbeing) - PSHE lessons explicitly teach children mental well being strategies, and what to do and who to talk to if they are feeling overwhelmed - Exercise and mindfulness activities planned as part of the daily routine - Assemblies focused on return to school and associated emotions e.g. the 5 steps to wellbeing. - Year 5 have ELSA as teaching assistant support to provide additional bereavement support if needed - Prompt contact with parents if there are concerns about a child's behaviour or things that they have said - Focus on renewed school Values on return and over Summer Term to help with 'reconnecting' the community and bolstering a sense of belonging - closely linked with a book-led PSHE project after Easter. - Mental Health Support working based in school as of Summer 2 - certain children have been identified as needing this additional support with post-lockdown mental health concerns 	SLT Onsite team SLT All staff				

