

Schools - Covid-19

This risk assessment is produced in conjunction with the current government guidance as highlighted below:

www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings.

This document compliments routine risk management documents for COSHH, Safeguarding, Engie FM and ISS catering

Directorate:	Schools	Date of Assessment:	22 May 2020
Service / Function:	Primary Schools	Location:	Queens Road Academy

Hazard	Risks	Control Measures	Actions Required	Person Responsible and Target Date
Schools Premise	Personal injury Fire Legionella Infection of coronavirus	<ul style="list-style-type: none"> Undertake a workplace inspection to ensure adequate working environment, equipment, fire safety and emergency arrangements are in place. Fire Risk Assessment to be reviewed and the Fire log-book is up to date. 	<ol style="list-style-type: none"> The headteacher is responsible for managing the premises and in their absence another suitable senior leader is required to be on site Identify a member of staff within school to be responsible for further school risk assessments as a result of implementing adjustments. E.g. opening windows doors (potential flight risk / entry for public) Weekly building checklist to be submitted to J Jackson (essential caretaker checklist covid19) Ensure school Legionella checks are up to date 	<ol style="list-style-type: none"> SK – 1st June ALL CHECK DATES BELOW TARGET 5th June 2020 unless indicated SK - For Legionella – Engie as routine log SK Legionella – Engie as routine log SK chk Engie – caretaker KP-BMBC

		<ul style="list-style-type: none"> • Legionella checks are to be up to date. • Electrical, gas and ventilation systems checks are up to date. • Increased cleaning regime. • Communal areas reduced/removed 	<ol style="list-style-type: none"> 5. Ensure Legionella checks have been complete or if not due are scheduled 6. Ensure schools have self-assessed against the criteria provided by the contractor in respect of Legionella 7. PFI schools to confirm compliance tasks and building related assurances from the responsible body 8. Complete the prestart building checklist. Any concerns reported 9. Ensure fire / security alarms are fully operational and in working order 10. Remote monitoring is in place – check operational 11. Ensure luminaires and emergency lighting is fully operational 12. Review the fire risk assessment 13. Ensure the fire log book is up to date 14. Ensure all people in the building are aware of fire/emergency arrangements 15. Conduct a fire drill before 15th June. Re-evaluate the findings and implement actions 16. Plan a secondary fire drill to see if findings have been resolved. Use a different time of day / timetable / rota to test wider staff understanding 17. Check access control and lockdown procedures are still operational 18. Ensure additional specialist equipment (needs dependant) has been serviced (as part of the routine service cycle) and is fit for purpose 19. Increase cleaning capacity with contractors or staff 20. Timetable / structure the school day to allow for additional cleaning 21. Consider the impact of increased ventilation against security measures (i.e. windows/doors open increases risk / likelihood of access in and out of the building. Safeguarding and security) and take action to nullify 	<ol style="list-style-type: none"> 7. KP-BMBC-Engie 8. SK 9. Engie caretaker/SK 10. Engie caretaker/SK 11. Engie caretaker/SK 12. Engie caretaker/SK 13. Engie caretaker/SK 14. SK – completed 1st June 15. SK – completed 1st June 16. SK – 20th June 20 17. SK 18. Engie caretaker – maintenance cycle in place 19. Engie/SK 20. SK – completed 1st June 21. Engie caretaker – building lock up process in place including remote monitoring 22. SK – poster, markings, Entrysign fob access– completed 1st June 23. SK – rota of staff room area 1st June 24. SK – All site users inc pupils have own stationary 1st June
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			<p>22. Reception areas – posters, 2m marks, no communal pen for signing in</p> <p>23. Staff room – protocol for fridge, kettle and eating areas</p> <p>24. Office equipment – protocol for sharing resources i.e. photocopier, pens, staplers etc</p>	
Infection Control	<p>Infection of coronavirus</p> <p>Dealing with direct transmission (e.g. close contact with those sneezing/coughing) and indirect transmission (e.g. touching contaminated surfaces)</p>	<ul style="list-style-type: none"> Minimise contact with individuals who are unwell by ensuring that those who have coronavirus symptoms, or who have someone in their household who does, do not attend childcare settings, schools or colleges. Cleaning hands more often than usual - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered. Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach. Cleaning frequently touched surfaces often using standard products (such as detergents and bleach). Minimise contact and mixing by altering, as much as possible, the environment (such as classroom layout) and 	<ol style="list-style-type: none"> Inform children, young people, parents, carers or any visitors, such as suppliers, not to enter the setting if they are displaying symptoms of coronavirus (following the COVID19 guidance for households with possible coronavirus infection) Assess that sufficient handwashing facilities are available and where these are required. Where a sink is not nearby, provide hand sanitiser in classrooms and other learning environments Inform everyone that shared resources (where individual resources are not possible) are to be used with a clean, use, clean regime. Wash hands / sanitise, use the resource and wash hands / sanitise again Inform everyone to wash / sanitise hands on arrival and exit of the building, before eating, after eating, sneezing or coughing. Ensure adequate signage Ensure sufficient supply of soap and hand sanitiser by contacting supply chain Provide training and continue to model good hand washing practice in line with government guidance Provide training and continue to model respiratory hygiene promoting 'catch it, bin it, kill it'. Ensure an initial order has been placed and processes are in place to re-order tissues in order to continue with the 'catch it, bin it, kill it'. Ensure staff are aware and have been informed of their responsibility for cleaning and continual upkeep of hygiene standards Ensure risk assessments are in place for any chemicals which are used and all staff have had the relevant training / guidance 	<ol style="list-style-type: none"> As letter/communications 22nd May SK – all 'Bubbles' of pupils have own wash room facilities SK SK Engie/caretaker SK SK – signage in place SK SK SK – COSHH check completed, Smartwater no-risk cleaning product – update req for santisers and awareness for staff own products brought in

		<p>timetables (such as staggered break times)</p>	<ol style="list-style-type: none"> 1. Ensure staff are aware of practices to ensure equipment is appropriately cleaned between use (different children / groups of children) 2. Designate a room for storage 3. Timetable should not use rooms for multiple purposes. Where this is a necessity documented arrangements for cleaning and infection control are required and must be produced beforehand. This includes the school hall 4. Develop a timetable and rota for cleaning of items which are touched, e.g. toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters etc. 5. Identify which windows are available to open and aid ventilation. (Safeguarding and fire procedures must not be compromised) 6. All non-fire doors to be propped open, where safe to do so (Safeguarding and fire procedures must not be compromised) to limit the use of door handles and increase ventilation 7. Any mechanical ventilation and/or recirculatory systems should be set to full fresh air. If this is not possible they should be switched off. 8. Continue chemical store ventilation 9. Timetable and inform parents of their staggered drop-off and pick-up times 10. Mark a one-way drop-off/pick-up route for parents. Including distancing lines. Entry and exit should not use the same route to avoid 'going against the flow of traffic' and to limit or eliminate any contact, including where possible passing. 11. Inform parents and display signage for drop-off/pick-up arrangements, e.g. 1 parent only; no access to the building without prior appointment; where to wait; no gatherings. 12. Inform children of their individual drop-off / pick-up protocol 13. Inform staff of their group protocol for drop-off/pick-up 14. Identify required contractors and other professionals and make arrangements for when/if 	<p>1.SK 2 SK – outdoor store 3 SK Rota – no communal pupil rooms or use of hall space excepting bad weather break 4 SK items cleaned daily with clean-use-clean methodology 5 Engie - high level all function okay 6 SK 7 Engie – caretaker 8 External vented 9 SK – communicated 22May 10 SK/Engie caretaker 11 communicated 22nd May 12 additional adults to introduce routine on day 1, signage on doors to groups 13 SK - communicated 22nd May 14 Engie- caretaker 15 Engie FM/daily cleaning 16 Caretkaer 17 SK communicated 22May 18 SK rota group design – each group own toilet area 19 clean-use-clean, group play boxes of resource</p>
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			<p>contractors/professionals need to be on site. Plans must include how school will ensure social distancing from the contractor/professional by use of either use of barriers, zonal occupancy or out of occupied school hours works. The plans should not compromise other factors.</p> <ol style="list-style-type: none"> 15. Arrange more frequent collection of clinical/offensive waste 16. Inform staff and produce a rota for frequent emptying of bins during the day 17. Timetable staggered lunch breaks and inform everyone involved of the arrangements 18. Plan how to limit the number of children using facilities such as toilets at the same time 19. Inform children, parents, carers and adults that outdoor equipment must not be used and safely segregate/block access to outdoor equipment. Outdoor equipment must not be used unless school can ensure it is appropriately cleaned in line with government guidance for non-healthcare settings 	
PPE (including face masks/coverings)	Spread of infection (coronavirus)	<p>The majority of staff in education settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others.</p> <p>PPE is only needed in a very small number of cases including:</p> <ul style="list-style-type: none"> • Children whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way. 	<ol style="list-style-type: none"> 1. School must place an initial order for PPE. This order should include sufficient stock of PPE for children whose care routinely requires PPE and any PPE requirements for potential first aid or individuals displaying symptoms 2. Have a stock monitoring process in place for PPE and facilities to re-order. Re-order volumes and timescales should factor in lead times and supply chain issues. 3. Prepare a room to be used as an isolation room for anyone displaying symptoms. The room should be prepared giving particular concern to cleaning and hygiene. Any routes to toilets or exit from the building should not be used by others. 4. Complete a first aid needs assessment and ensure timetables and rotas are planned with sufficient 	<ol style="list-style-type: none"> 1. SK order placed – received 2. SK-Admin team, weekly check and order YPO 3. SK – Alt use of Disabled toilet space reception 4. SK rota includes TA’s first aiders 5. SK – PPE placed in each work space for staff on arrival

		<ul style="list-style-type: none"> If a child becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eye e.g. from coughing, spitting, or vomiting, then eye protection should also be worn. 	<p>levels of relevantly qualified, confident and qualified individuals.</p> <p>5. Adopt the mantra more PPE is better than no or less PPE</p>	
Shielded and clinically vulnerable children	Infection of the coronavirus to vulnerable children	<ul style="list-style-type: none"> For the vast majority of children coronavirus is a mild illness. However children classified as clinically extremely vulnerable due to pre-existing medical conditions have been advised to shield. These children are not expected to attend school, and they should continue to be supported at home as much as possible. Clinically vulnerable (but not clinically extremely vulnerable) people are those 	<ul style="list-style-type: none"> Individual risk assessments for vulnerable/SEND pupils Remote working through the use of Google Classrooms to enable equal access to work provided at school Communication of what to do if a child has symptoms 	<ul style="list-style-type: none"> BK – ind Pupil RA NF – maintain work flow for pupils SK – as communicated May 22nd additional information on school website

		<p>considered to be at a higher risk of severe illness from coronavirus. A small minority of children will fall into this category, and parents should follow medical advice if their child is in this category.</p> <ul style="list-style-type: none"> • Children should not attend school if they have symptoms or are self-isolating due to symptoms in their household. 		
Shielded and clinically vulnerable adults	Infection of the coronavirus to vulnerable adults	<ul style="list-style-type: none"> • Clinically extremely vulnerable employees (advised by their clinician or through a letter) are advised not to work outside the home. • Employees to follow shielding measures in order to keep themselves safe. Staff in this position are advised not to attend work. Read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice. • Clinically vulnerable employees who are at higher risk of severe illness (for example, people with some pre-existing conditions as set out in the Staying at home and away from others (social distancing) guidance have been advised to take extra care in observing social distancing and should 	<ul style="list-style-type: none"> • Agree what work can be completed at home • Risk assessment completed • Referral to OHU where necessary • Referral to OHU where necessary • Staff guidance document 	<p>SK – Provision of Staff risk template to SMAT HR</p> <p>SMAT support for wellbeing in place and accessible through Yorkshire Psychotherapy service</p>

		<p>work from home where possible. To support this school may ask staff to support remote education, carry out lesson planning or other roles which can be done from home.</p> <ul style="list-style-type: none"> • If clinically vulnerable (but not clinically extremely vulnerable) individuals cannot work from home, they should be offered the safest available on-site roles, staying 2 metres away from others wherever possible, although the individual may choose to take on a role that does not allow for this distance if they prefer to do so. If they have to spend time within 2 metres of other people, school must carefully assess and discuss with them whether this involves an acceptable level of risk. • Employees should not attend school if they have symptoms or are self-isolating due to symptoms in their household. 		
Living with a shielded or clinically vulnerable person	Transmission of the coronavirus	<ul style="list-style-type: none"> • If a child or a member of staff lives with someone who is clinically vulnerable (but not clinically extremely vulnerable) including those who are 	<ul style="list-style-type: none"> • Agree what work can be completed at home • Risk assessment completed 	SK – Provision of Staff risk template to SMAT HR

		<p>pregnant, they can continue to attend school.</p> <ul style="list-style-type: none"> If a child or staff member lives in a household with someone who is extremely clinically vulnerable, as set out in the COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable guidance, it is advised they only attend school if stringent social distancing can be adhered to and, in the case of children, they are able to understand and follow those instructions. This may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing. If stringent social distancing cannot be adhered to, the child is not expected to attend. They should be supported to learn or work at home. 	<ul style="list-style-type: none"> Referral to OHU where necessary Referral to OHU where necessary Staff guidance document 	
Class/groups sizes	Infection of the coronavirus	<ul style="list-style-type: none"> Reduce contact between people as much as possible e.g. only mix in a small, consistent group and that small group stays away from other people and groups. Where possible keep children in those small groups 2 metres away from each other. While in 	<ol style="list-style-type: none"> Identify pupil/staff bubbles Either mark a one-way circulation route throughout school or separate corridors with dividers Ensure signage is in place to support the new systems and ways of working Organise classrooms and other environments to maintain space between desks (ideally 2m apart) 	<ol style="list-style-type: none"> Rota as circulated 22 May Walk on left circulation SK SK/caretaker – reduced table to 15/class all 1.5m apart SK items removed SK items removed

		<p>general groups should be kept apart, brief, transitory contact, such as passing in a corridor, is low risk.</p> <ul style="list-style-type: none"> • For pre-school children in early years settings, the staff to child ratios within Early Years Foundation Stage (EYFS) continue to apply as set out here. • For primary schools, classes should normally be split in half, with no more than 15 pupils per small group and one teacher (and, if needed, a teaching assistant). If there are any shortages of teachers, then teaching assistants can be allocated to lead a group, working under the direction of a teacher. • Vulnerable children and children of critical workers in other year groups should also be split into small groups of no more than 15. Desks should be spaced as far apart as possible. • Avoid contact with anyone with symptoms • Frequent hand cleaning and good respiratory hygiene practices 	<ol style="list-style-type: none"> 6. Remove all unnecessary items from all rooms before re-opening 7. Remove soft furnishings / hard to clean items before re-opening 8. Where practically possible provide each desk with personal equipment not to be used by others 9. Inform staff not to change seating arrangements. Children should use the same desk at all times 10. Document plans to adhere to government guidance for cleaning in non-healthcare settings <p>11. Agree maximum number of pupils in school with CEO</p>	<ol style="list-style-type: none"> 7. SK all pupils provided stationary pack on June 1st 8. SK 9. SK 10. SK 11. SK agreed with CEO max number is largest rota groups - F1 plus Y6 26+51, where F1 are am only. (21 keyworker) 12. SK June 1st 13. SK 14. Engie Caretaker 15. Through Week 1 return as staff meet on return 16. SK removed 17. Not required as no movement 18. Engie caretaker 1st June 19. SK 22 May 20. SK 22 May 21. SK 22 May 22. SK 22 May 23. SK as Rota 22nd May 24. SK resources in place 25. SK
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		<ul style="list-style-type: none"> • Regular cleaning of settings • Minimising contact and mixing • Staggered arrival and departure times • Meeting needs of EHCP pupils • Pupil resources 	<p>12. Hand sanitizer in each classroom, hall and entrance</p> <p>13. Daily checklist completed 14. Cleaning schedules 15. Staff aware of cleaning requirements 16. Removal of soft furnishings</p> <p>17. Markers showing walkway directions 18. 2 M apart markers</p> <p>19. Communicated to staff 20. Communicated to parents 21. Communication to pupils</p> <p>22. Risk Assessment completed</p> <p>23. One child per desk 24. Personal resources i.e. book, pen, ruler, pencil 25. No sharing of equipment</p>	
Lack of Awareness	Infection of the coronavirus to vulnerable adults	<ul style="list-style-type: none"> • Communication 	<ul style="list-style-type: none"> • Staff to be provided with guidance pack, that includes expectations, protocols etc • Parents to be provided with guidance that includes expectations, protocols etc • Posters 	<ol style="list-style-type: none"> 1. Induction on staff return of RA – As rota 2. As communicated 22nd May 3. SK Caretaker – in place 4. LS/BK induction

		<ul style="list-style-type: none"> • Supply staff 	<ul style="list-style-type: none"> • Induction provided on arrival re guidance pack, protocols within school 	
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Manager's Assessment Acceptance Statement

I accept the details of the assessment and will ensure that the risk control measures identified, any risk control actions identified and monitoring requirements are acted upon within the given time scales.

Manager's Signature	S.Kaufman
Date	22nd May 2020
CEO Signature	
Date of planned review (not to exceed 12 months)	
Date of planned full re-assessment (not to exceed 24 months)	