

RISK ASSESSMENT

Company:	Inspire Partnership Multi Academy Trust	Date of Assessment:	12.05.20
Schools:	Gawthorpe Community Academy, Towngate Primary Academy, Half Acres Primary Academy, Ackton Pastures Primary Academy, Girnhill Infant School, Fitzwilliam Primary School, South Hiendley Primary School, Ash Grove Primary Academy		
Description of work activity / process being assessed:	Prepare for Wider Opening of Schools from 1 st June following Lockdown and Partial School Closure as a result of Covid-19 Initially Nursery/Reception/Year 1 and Year 6 followed by remaining year groups (potentially from July).		

Persons exposed:		Type of assessment:	
Employees	<input checked="" type="checkbox"/>	Initial	<input type="checkbox"/>
Pupils	<input checked="" type="checkbox"/>	Change in Government Guidance following Covid 19 Outbreak	<input checked="" type="checkbox"/>
Contractors	<input checked="" type="checkbox"/>	Operational review	<input checked="" type="checkbox"/>
Visitors / Members of the public	<input checked="" type="checkbox"/>		

COVID – 19 (Corona Virus)

COVID-19 affects the lungs and airways of those infected and is primarily spread through respiratory droplets, which means to become infected, people generally must be within six feet of someone who is contagious and come into contact with these droplets. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or their eyes.

Symptoms of COVID-19 appears usually within two to 14 days after exposure and include fever, cough, runny nose and difficulty breathing. Generally, these infections can cause more severe symptoms in people with weakened immune systems, older people, and those with long-term conditions like diabetes, cancer and chronic lung disease.

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
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RE-OPENING SCHOOLS

Reopening schools too soon and increasing the risk of direct and indirect transmission and spread of Covid 19	Govt will only reopen schools provided that the 5 key tests set by them have been met		Govt	28 May 20	
	Ensure all H&S compliance checks have been undertaken		Premises Teams and AS	31 May 20	
	Ensure each school has a deep clean prior to opening				
	Review cleaning hours/requirements to perform deep cleans in between changeovers of groups				
	Ensure catering contractors adhere to stringent cleaning protocols in their areas				

EFFECTIVE INFECTION PROTECTION AND CONTROL

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
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Direct & indirect transmission of the virus	Minimising 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 school	Communicate expectations clearly with parents	Headteacher	31 May 20	
	Cleaning hands more often than usual	Wash hands thoroughly for 20 seconds with running water & soap and dry them thoroughly or use hand sanitiser ensuring all parts of the hand are covered. Hand Sanitiser stations installed in classrooms	ALL	Ongoing	
	Ensuring good respiratory hygiene – promote the 'catch it, bin it, kill it' approach	Tissues/bins in all classrooms and to be emptied throughout the day.	Premises & Classroom based staff	Ongoing	

		Educate pupils to use tissues or sneeze into elbow area of arm			
	Cleaning frequently touched surfaces often using appropriate detergents	Cleaning routines reviewed and classroom based staff to regularly wipe down surfaces. Zoono products to be used by premises teams which are shown to provide additional protection	Premises & Classroom based staff	Ongoing	
	Minimising contact and mixing by altering the environment/daily routines from 1 June 20	Review classroom layouts to provide 2m gaps between desks where physically feasible. Amend curriculum. Stagger start and finish times, break and lunch times to minimise opportunities to mix	Premises & Classroom based staff	Ongoing	
	Children displaying any signs of illness will not be allowed into school	Parents will be asked to keep children if unwell for any reason	SLT		
	Children must be toilet trained before returning to school as staff will only be allowed to facilitate intimate care duties for those with an EHCP/Statement				
	Ensure children are in small groups at all times each day, and different groups are not mixed during the day, or on subsequent days				
	If a child has an accident and requires first aid, staff members must wear appropriate PPE to administer first aid and parents will be asked to collect their child from school				
	Ensure that the same teacher(s) and other staff are assigned to each group and, as far as possible, these stay the same during the day and on subsequent days				
	Ensure where possible the same classroom/area per group is used throughout the day with a thorough cleaning at the end of the day or changeover to a new group				

	Decide which lessons/activities can be delivered			
	Consider which lessons or classroom activities could take place outdoors			
	Reduce movement around the school			
	Stagger break and lunch times and consider groups remaining in one location at these times to reduce movement around school			
	Stagger drop off and collection times and plan parents' drop off and pick up protocols that minimise adult to adult contact (only one parent/carer should attend)	Communicate protocols clearly with parents and identify which entrance/exit points each group will be using		
	Parents/carers cannot enter the site and/or gather at school gates and doors – to be managed at school level			
	Stagger/remove assembly times from daily routines			
	Remove unnecessary items from the classrooms and other learning environments where there is space to store it elsewhere			
	Remove soft furnishings, soft toys and toys that are hard to clean			
	Implement a one way system, where possible, or place a divider down the middle of the corridor to keep groups apart as they move through the school		SLT	
	Access rooms directly from outside, where possible			
	Doors to be propped open (exc fire doors) rooms need to be well ventilated with windows open			
	Ensure toilets do not become overcrowded by limiting the number of children using the facilities at any one time. Each group to consistently use the same facilities			
	Use outdoor space for outdoor education, exercise and breaks although outdoor equipment should not be used unless it is appropriately cleaned between groups of children using it.			
	Use halls, dining areas at half capacity – these areas can be shared as long as different groups do not mix and adequate cleaning between groups is in place			
	Reduce the use of shared resources			

	Limit the exchange of take home resources between children and staff				
	Prevent the sharing of stationery and other equipment. Shared materials and surfaces should be cleaned and disinfected more frequently				
	Review of current pupil and staff risk assessments where necessary				
	Review of the school's behaviour policy to ensure that it covers COVID 19 related incidents				
	Remove/reduce unnecessary usage of school transport for children arriving to school				
	No visitors, staff, children, contractors, parents can enter the buildings if they have any symptoms				

PERSONAL PROTECTIVE EQUIPMENT (PPE) Including Face Coverings & Face Masks

DfE guidance states wearing a face covering or mask in schools is not recommended and therefore schools should not require staff & children to wear face coverings.

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
Direct & indirect transmission of the virus	Only children whose care routinely involves the use of PPE due to intimate care needs should continue to receive their care in the same way. Children who have accidents/soil themselves will not be changed and parents will be contacted to collect them.	Face masks, gloves, aprons available for staff to use. Children without	All Staff	Ongoing	
Child becoming unwell with symptoms of coronavirus and needs direct personal care until they can be collected from school	A face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact is necessary, then gloves, an apron and a face mask should be worn by the supervising adult.	If there is a risk of splashing to the eyes from coughing, spitting or vomiting then eye protection should also be worn	All Staff	Ongoing	

SHIELDED AND CLINICALLY VULNERABLE CHILDREN

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
Direct & indirect transmission of the virus amongst individuals deemed to be at a higher risk of severe illness	Children classed as clinically extremely vulnerable due to pre-existing medical conditions have been advised to shield and we do not expect these children to be attending school	Each school to have list of children in this category and ensure they do not attend school. Continue to support at home as much as possible	SLT	31 May 20	
	Parents of children classed as clinically vulnerable should follow medical advice as these children are considered to be at a higher risk of severe illness from coronavirus	Each school to have list of children in this category and discuss implications with parents	SLT	31 May 20	

SHIELDED AND CLINICALLY VULNERABLE ADULTS

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
Direct & indirect transmission of the virus amongst individuals deemed to be at a higher risk of severe illness	Clinically extremely vulnerable individuals (those with serious underlying health conditions which put them at very high risk of severe illness from coronavirus & have been advised by their clinician or through a letter) are advised to rigorously follow shielding measures and not to work outside the home	Each school to identify these staff members and arrange for them to continue working from home	SLT	31 May 20	
	Clinically vulnerable individuals who are at higher risk of severe illness (e.g. people with some pre-existing conditions as set out in the Staying at home and away from others guidance) are advised to take extra care in observing social distancing and should work from home where possible	Each school to identify these staff members and arrange for them to continue working from home	SLT	31 May 20	
Clinically extremely vulnerable people may include the following: <ul style="list-style-type: none"> • Solid organ transplant recipients • People with specific cancers: 					

	<ul style="list-style-type: none"> - People with cancer who are undergoing active chemotherapy - People with lung cancer who are undergoing radical radiotherapy - People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment - People having immunotherapy or other continuing antibody treatments for cancer - People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors - People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs • People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary (COPD) • People with rare diseases that significantly increase the risk of infections (such as SCID, homozygous sickle cell) • People on immunosuppression therapies sufficient to significantly increase risk of infection • Are pregnant with significant heart disease, congenital or acquired 			
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LIVING WITH A SHIELDED OR CLINICALLY VULNERABLE PERSON

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
Direct & indirect transmission of the virus amongst individuals in your household deemed to be at a higher risk of severe illness	If a child or member of staff lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can attend school/work.				
	If a child or member of staff lives with someone who is clinically extremely vulnerable, (as set out in the COVID 19 guidance on shielding & protecting people defined on medical grounds as extremely vulnerable guidance) it is advised they only attend school/work if stringent social distancing can be adhered to and, in the case of children, they are able to understand and follow those instructions	<p>Each school to identify these staff members and arrange for them to continue working from home if social distancing guidelines cannot be met within their school.</p> <p>Each school to identify children who fall into this category and determine if social distancing guidelines can be met within their school & if they can follow them. If not, these children should remain at home</p>	SLT	31 May 20	

CLASS/GROUP SIZES

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
Transmission risk is higher in larger group sizes and where groups are not kept apart (Brief, transitory contact, such as passing in a corridor, is low risk)	Reduce contact between people as much as possible by ensuring children only mix in a small consistent group and that small groups stays away from other people and groups	Max of 15 children per group Staff to child ratios in EYFS continue to apply	SLT	31 May 20	
	Each small group to remain 2 metres away from each other, where settings allow		SLT	31 May 20	
	Classes to be split in half, with no more than 15 children and one teacher (and, if needed a TA).				
	Desks spaced as far apart as possible				
Not enough staff to supervise the groups	If there are shortages of teachers, TAs can be allocated to lead a group, working under the direction of a teacher)		SLT	Ongoing	
	Schools could work together in a hub model		SV/HTs	31 May 20	
	Apply flexibility to focus first on continuing to provide places for priority groups as follows: - - Nursery, reception and year 1		SV/HTs	31 May 20	
	Flexible approach to the timetable and amount of time spent in school (e.g half days, one week in followed by one week of home schooling etc)		SV/HTs	31 May 20	

IF SOMEONE BECOMES UNWELL IN YOUR SCHOOL

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
If someone shows symptoms of the virus, there is a higher risk of transmission to others	If someone becomes unwell with a new, continuous cough or a high temperature they must be sent home and advised to follow the COVID 19 guidance for households with possible coronavirus infection guidance		SLT	Ongoing	
	If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. If it is not possible to isolate them, move them to an area which is at least 2metres away from other people	A window should be opened for ventilation	SLT	Ongoing	
	If they need to use a bathroom while waiting to be collected, they should use a separate bathroom if possible	The bathroom should be cleaned and disinfected before being used by anyone else	SLT	Ongoing	
	PPE should be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (ie a very young child or one with complex needs)		All Staff	Ongoing	
	The member of staff of staff who helped the individual does not need to go home unless they develop symptoms themselves (in which case a test is available)	Wash their hands thoroughly for 20 seconds after any contact with someone who is unwell	All Staff	Ongoing	
	Cleaning the affected area(s) with disinfectant after someone with symptoms has left to reduce the risk of passing the infection onto others		All Staff	Ongoing	
Individual being severely ill on your premises	In an emergency call 999 if seriously ill or injured or their life is at risk.	Do not visit the GP, pharmacy, urgent care centre or a hospital	SLT/All Staff	Ongoing	

CLEANING AND HYGIENE

Follow the COVID 19: cleaning of non healthcare settings guidance

Hazards:	Control measures already in place:	Additional control measures required to reduce the risk:	Who will complete?	By when:	Date completed:
<p>Potential Exposure to Covid – 19 (Corona Virus):</p> <p>Normal cleaning routine.</p>	<p>Use guidance from World Health Organization and NHS to ensure the risk assessment is following the latest advice.</p> <p>Follow UK Government guidelines in reducing the likelihood of exposure. https://www.gov.uk/government/topical-events/coronavirus-covid-19-uk-government-response</p> <ul style="list-style-type: none"> • Personal protective equipment (PPE) <ul style="list-style-type: none"> • Disposable gloves • Apron • Hands should be washed with soap and water for 20 seconds after all PPE has been removed. • Clean and disinfect frequently touched objects and surfaces. • Do not touch your eyes, nose or mouth if your hands are not clean. 	<p>Additional cleaning products (Zoono) introduced to bolster the impact of routine cleaning. MSDs issued to PS</p> <p>Internal deep cleans by external contractor</p> <p>Fogging machine to be purchased and conducted at each school at termly intervals (central team to purchase)</p> <p>Increase availability of PPE</p> <p>Increase order quantities of skin friendly hand soap</p> <p>Cleaning routine to be extended to door handles and access keypads</p> <p>Wash hands after cleaning task</p>	<p>EHSO</p> <p>EHSO to organise</p> <p>PS</p> <p>PS</p> <p>PS</p> <p>Cleaners</p>	<p>Ongoing</p> <p>31 May 20</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>	
<p>Potential Exposure to Covid – 19 (Corona virus):</p> <p>Cleaning after symptomatic individual has passed through and spent minimal time.</p>	<p>All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:</p> <ul style="list-style-type: none"> • Objects which are visibly contaminated with body fluids. 	<p>Fog area if suspected symptomatic person has come in contact</p> <p>When suspected that it is covid-19 additional PPE measures to be taken i.e.</p>	<p>PS</p>	<p>Ongoing</p> <p>Ongoing</p>	

	<ul style="list-style-type: none"> All potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells. <p>Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:</p> <ul style="list-style-type: none"> Use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine; <p>or</p> <ul style="list-style-type: none"> A household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants; <p>or</p> <ul style="list-style-type: none"> If an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses. <p>Avoid creating splashes and spray when cleaning. Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.</p> <p>When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.</p> <p>Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.</p> <p>If possible, keep an area closed off and secure for 72 hours. After this time the amount of virus</p>	<p>face mask and eye protection. Training on the PPE to be given i.ee donning a mask.</p> <p>Increase order quantities. EHSO to work with PS to source items difficult to find and make orders on behalf of the trust as required.</p> <p>Wet wipe surfaces. Apply chosen cleaning chemical and wipe with warm wet cloth</p> <p>Fogging and External cleaning specialised to be organised as additional precautions at agreed intervals</p>	<p>EHSO/PS</p>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>	
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	contamination will have decreased substantially, and you can clean as normal with your usual products.				
Waste Normal removal of waste (including disposable cloths and tissues):	<p>Waste should be put in a plastic rubbish bag and tied when full.</p> <ul style="list-style-type: none"> • Personal protective equipment (PPE) <ul style="list-style-type: none"> • Disposable gloves • Apron • Hands should be washed with soap and water for 20 seconds after all PPE has been removed. • Clean and disinfect frequently touched objects and surfaces. • do not touch your eyes, nose or mouth if your hands are not clean. 	<p>Increase availability of PPE</p> <p>Increase order quantities of skin friendly hand soap</p>	<p>PS</p> <p>PS</p>	<p>Ongoing</p> <p>Ongoing</p>	
Waste Waste from possible cases and cleaning of areas where possible cases have been.	<p>Waste should be put in a plastic rubbish bag and tied when full.</p> <p>The plastic bag should then be placed in a second bin bag and tied.</p> <p>It should be put in a suitable and secure place and marked for storage until the individual's test results are known.</p> <p>Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.</p> <p>If the individual tests negative, this can be put in with the normal waste.</p> <p>If the individual tests positive, then store it for at least 72 hours and put in with the normal waste</p>	<p>Specific log to be kept remote from waste storing area to keep accurate inventory of suspected contaminated waste. Log to be maintained by senior leadership team.</p> <p>When suspected that it is covid-19 additional PPE measures to be taken i.e.</p>		<p>Ongoing</p> <p>Ongoing</p>	

	<p>If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.</p>	<p>face mask and eye protection</p>			

<p>Review period:</p>	<p>After any UK Governmental Department announcement.</p>
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