

This document is integral to the schools ongoing response to the Covid-19 pandemic. The content of this document is being produced in consultation with information from staff, parents, governors, union representatives, with information from the DfE that follows PHE and the Health and Safety Executive (HSE). The risk assessment is for the 2021-2022 academic year and will be kept under review and may change in line with government guidance



Covid-19 risk assessment 2021-2022 Academic Year

Introduction

“Step 4 has marked a new phase in the government’s response to the pandemic, moving away from stringent restrictions on everyone’s day-to-day lives, towards advising people on how to protect themselves and others, alongside targeted interventions to reduce risk. As Covid-19 becomes a virus that we learn to live with, there is now an imperative to reduce the disruption to children and young people’s education - particularly given that the direct clinical risks to children are extremely low, and every adult has been offered a first vaccine and the opportunity for 2 doses by mid-September. Our priority is for you to deliver face-to-face, high-quality education to all pupils. The evidence is clear that being out of education causes significant harm to educational attainment, life chances, mental and physical health” (taken from the Schools Covid-19 operational guidance).

The DfE has moved from contact tracing for single cases to an outbreak management approach for education settings.

While coronavirus (COVID-19) remains in the community, this means making judgments at a school level about how to balance and minimise any risks from coronavirus (COVID-19) with providing a full educational experience for children and young people. The school has a Covid-19 outbreak management plan, this plan is based on the [contingency framework for managing local outbreaks](#) of COVID-19, provided by the Department for Education (DfE).

The system of controls in education will have contributed to reducing the risk of infection within settings and testing has also helped to break chains of transmission. That is why, whilst some measures are eased, others will remain; these will maintain a baseline of protective measures while maximising attendance and minimising disruption to education.

Mixing and Bubbles

It is no longer recommended that it is necessary to keep children in consistent groups (‘bubbles’) although the temporary re-introduction of ‘bubbles’ should be included in the schools contingency planning.

Social distancing

Social distancing measures have now ended in the workplace, including schools.

Tracing close contacts and isolation

School are no longer required to undertake contact tracing. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case specifically identifies the individual as being a close contact. Schools may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. This is likely to be the case for young children and those attending special schools.

If identified as a close contact by NHS Test and Trace, the following people are exempt from self-isolation but must follow [government guidance](#) including getting a PCR test:

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- Those that are fully vaccinated
- Those that are below the age of 18 years 6 months
- Those that have taken part in or are currently part of an approved COVID-19 vaccine trial
- Those that are not able to get vaccinated for medical reasons

Face Coverings

Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas. The government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where one may come into contact with people they don't normally meet. This includes public transport and dedicated transport to school or college. The temporary re-introduction of face coverings should be included in the schools contingency planning.

Carbon Dioxide (CO2) Monitors

CO2 monitors will be provided to all state-funded schools from September as part of an initiative led by central government. The monitors will enable staff to act quickly where ventilation is poor and provide reassurance that existing ventilation measures are working. The majority of these monitors shall be provided to schools in the autumn term and prioritised for special schools and alternative provisions. The school will follow the guidance for CO2 monitor use when further details are available and the school has a delivery date from the DfE for the CO2 monitors.

Covid-19 Vaccines

Schools should continue to encourage all those eligible for Covid vaccines to engage with the NHS vaccine programme.

The following actions will contribute to reducing the likelihood of COVID-19 transmission:

- 1) Ensure good hygiene for everyone
- 2) Maintain appropriate cleaning regimes
- 3) Keep occupied spaces well ventilated
- 4) Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19

Further government guidance can be found at: [Actions for schools during the coronavirus outbreak - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/actions-for-schools-during-the-coronavirus-outbreak), [Contingency framework: education and childcare settings \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/guidance/contingency-framework-education-and-childcare-settings)

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School: Ruislip Gardens Primary School		School address: Stafford Road, Ruislip Gardens, HA4 6PD		Review Date: (This is a dynamic document and should be reviewed and updated if there are any changes)				
Assessment Date: 1st September 2021 onwards		What/who is being assessed? Biological hazard- Covid-19 within educational settings (This risk assessment signposts to the relevant Government guidance as well as any internal specific controls/measures).						
Name of Assessor: Rachel Nash, Business Manager				Responsible Person for Actions: Nicky Bulpett or person deputising: Acting Headteacher, Mrs Mari Basson				
Task / Activity Area	Hazard	Who might be harmed and how?	What are your existing controls?	Recommended Control Measures	Action by who/when ?	Likelihood of occurrence after recommended controls added (L)	Impact (I)	Overall Risk (L X I) + I
			<i>SLT's to write what is being done now and then refer to Recommended controls:</i>	<i>SLT's to move Recommended Controls into Existing Controls once they have been implemented:</i>		1-Very Unlikely 2-Unlikely 3- Possible 4- Likely 5- Very Likely Likelihood = Probability of occurrence based on specific activity being assessed	1-Negligible 2- Minor 3- Moderate 4- Major 5- Extreme Impact = Estimate of harm based on specific activity being assessed	<10 = Low 10-19 = Medium 20-30 = High

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				<ul style="list-style-type: none"> ● Good respiratory hygiene practices (Catch It, Bin It, Kill It) ● Guidance for school offices can be found here 				
Reducing exposure and transmission of Coronavirus (All settings)	Biological hazard- Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and hospitalisation, and, in rare cases, even death	<p>Government guidance to be followed for primary schools.</p> <p>Government guidance to be followed by early years settings. The early years foundation stage (EYFS) statutory framework still applies.</p>	<p>Ensure good hygiene for everyone</p> <ul style="list-style-type: none"> ● Hand hygiene- Frequent and thorough hand cleaning is already a regular practice now. Continue to ensure that pupils clean their hands regularly. This can be done with soap and water or hand sanitiser. ● Respiratory hygiene-The ‘catch it, bin it, kill it’ approach continues to be very important. The e-Bug COVID-19 website contains free resources for schools, including materials to encourage good hand and respiratory hygiene. ● Use of personal protective equipment (PPE)- Refer to the PPE section 	SLT – ongoing Class based staff – ongoing	2	3	(2X3) +3 = 9 (Low)

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				<p>2) Maintain appropriate cleaning regimes, using standard products such as detergents-</p> <ul style="list-style-type: none"> Schools should maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces (both inside and outside including play equipment). <u>Government guidance</u> on cleaning followed All staff have been provided with anti-bacterial wipes for surfaces and equipment and anti-bacterial hand sanitiser for personal use Classrooms, offices, study and staffrooms will have anti-bacterial wipes to use on equipment, handles, taps that they touch. Staff should clean any area they use after themselves 	<p>SLT/ Site staff-ongoing</p>				
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				<p>including cups, plates, cutlery and put it away after themselves</p> <p>3. Keep occupied spaces well ventilated</p> <ul style="list-style-type: none"> ● Improve fresh air in poorly ventilated areas, giving particular consideration when holding events where visitors such as parents are on site. ● Make use of the CO2 monitors that are being provided by central government to identify poorly ventilated rooms. ● Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). ● HSE guidance on ventilation available here 	<p>Site staff when at the start of the day, all staff - ongoing</p> <p>SLT when take delivery of CO2 monitors</p> <p>All staff-ongoing</p>			
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				<p>4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19</p> <p>Symptoms:</p> <ul style="list-style-type: none"> ● Pupils, staff and visitors should not come into school if they have symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine). ● If anyone in the school develops COVID-19 symptoms, however mild, they should be sent home (not via public transport wherever possible) and told to self-isolate and follow the <u>stay at home guidance</u> including taking a test. Any household members should also follow this guidance. Any pupil with symptoms awaiting collection should 	<p>Staff/parents /visitors – ongoing</p> <p>SLT/welfare/ Site staff – ongoing as required</p>			
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				<p>be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. Appropriate <u>PPE</u> should also be used if close contact is necessary. Any rooms they use should be cleaned after they have left.</p> <p>Asymptomatic Testing (LFD testing):</p> <ul style="list-style-type: none"> • Staff should self-test twice per week (3-4 days apart) and share results with the school and the NHS online portal. Participation in self-testing is voluntary. <p>Confirmatory PCR Tests:</p> <ul style="list-style-type: none"> • Staff and pupils with a positive LFD test result should self-isolate in line with the <u>stay at home guidance</u>. They will also need to get a free <u>PCR test</u> to check if they have Covid-19. Whilst awaiting the PCR 	<p>Staff - ongoing</p> <p>Staff/parents - ongoing</p>			
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				<p>result, the individual should continue to self-isolate. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.</p> <ul style="list-style-type: none"> ● <u>Additional information on PCR test kits for schools and further education providers is available.</u> <p>Close Contact Tracing:</p> <ul style="list-style-type: none"> ● Close contacts will be identified via NHS Test and Trace and education settings are no longer expected undertake contact tracing. NHS Test and Trace will work with the positive case to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case specifically identifies the individual as being a 	Staff/parents - ongoing			
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				<p>close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact. Schools may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.</p> <ul style="list-style-type: none"> ● If identified as a close contact by NHS Test and Trace, the following people are exempt from self-isolation but must follow government guidance including getting a PCR test: <ul style="list-style-type: none"> ○ Those that are fully vaccinated ○ Those that are below the age of 18 years 6 months ○ Those that have taken part in or are currently part of an 				
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				<p>approved COVID-19 vaccine trial</p> <ul style="list-style-type: none"> ○ Those that are not able to get vaccinated for medical reasons <p>Vaccine uptake:</p> <ul style="list-style-type: none"> ● Schools should continue to encourage all those eligible for Covid vaccines to engage with the NHS vaccine programme. <p>Face coverings:</p> <ul style="list-style-type: none"> ● Refer to PPE section <p>CEV Children:</p> <ul style="list-style-type: none"> ● All CEV children and young people should attend their education setting unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their GP or clinician not to attend. 	SLT – ongoing			
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				<p>Further information is available in the guidance on supporting pupils at school with medical conditions.</p> <p>CEV Staff:</p> <ul style="list-style-type: none"> CEV people are no longer advised to shield but may wish to take extra precautions to protect themselves, and to follow the practical steps set out in the CEV guidance to minimise their risk of exposure to the virus. <p>Out-of school settings and wraparound childcare:</p> <ul style="list-style-type: none"> Planning guidance can be found here 				
Educational visits	Biological hazard-Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to		<ul style="list-style-type: none"> Schools should carry out risk assessments for all trips that should include Covid measures to be followed by the school and the trip provider. Trips planner documents to be shared with the school's EVC. 	SLT/EVC/Teachers	1	3	<p>(1X3) +3 = 6 (Low)</p>

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		experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and hospitalisation, and, in rare cases, even death						
Lunch	Biological hazard- Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe		<ul style="list-style-type: none"> School kitchens to comply with the guidance for food businesses on Coronavirus 	SLT/Kitchen staff	2	3	(2X3) +3 = 9 (Low)

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		illness and hospitalisation, and, in rare cases, even death						
Transport Arrangements	Biological hazard-Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and hospitalisation, and, in rare cases, even death		<ul style="list-style-type: none"> ● Schools, parents and students should follow the Coronavirus (COVID-19): safer travel guidance for passengers ● All people travelling to England must adhere to travel legislation, details of which are set out in government travel advice ● Dedicated transport providers to consider: <ul style="list-style-type: none"> ○ Face coverings to be worn by children and young people aged 11 and above. ○ use of hand sanitiser upon boarding. and/or disembarking ○ additional cleaning of vehicles 		2	3	(2X3) +3 = 9 (Low)

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				<ul style="list-style-type: none"> ○ ventilation of fresh air (from outside the vehicle) is maximised, particularly through opening windows and ceiling vents ● Public transport: <ul style="list-style-type: none"> ○ Face coverings to be used by children over the age of 11. 				
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Dealing with suspected and confirmed cases of Covid-19	Biological hazard-Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and		<ul style="list-style-type: none"> ● If a pupil develops symptoms and is awaiting collection, <u>government guidance</u> should be followed and the pupil moved to a ventilated isolation room. <p>DfE Thresholds</p> <ul style="list-style-type: none"> ● Schools and the local authority will manage any cases that meet or exceed DfE thresholds in accordance with the <u>DfE Contingency Framework</u>. 		2	3	(2X3) +3 = 9 (Low)
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		hospitalisation , and, in rare cases, even death						
Use of PPE/face coverings	Biological hazard-Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and hospitalisation , and, in rare cases, even death		<ul style="list-style-type: none"> • Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas. They are, however, recommended for use in enclosed and crowded spaces where one may come into contact with people they don't normally meet. • Government guidance on PPE to be followed. • Any PPE should be disposed of in line with Government guidance on cleaning in non-healthcare settings. 		2	3	(2X3) +3 = 9 (Low)

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Administering First aid/ Medication	Biological hazard- Covid-19	Staff, parents and pupils could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever or cough. In severe cases, this could lead to severe illness and hospitalisation, and, in rare cases, even death	<ul style="list-style-type: none"> • <i>Schools have a suitable number of staff on duty</i> • <i>Schools have a first aid risk assessment and medication policy in place</i> 	<ul style="list-style-type: none"> • <u>HSE guidance on first aid</u> followed. This includes first aid cover and qualifications as well as guidance for first aiders • Administering first aid and medication risk assessments to be amended by schools • <u>Government PPE guidance</u> followed. 		2	3	(2X3) +3 = 9 (Low)
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Likelihood:						
Very Likely	5	6	12	18	24	30
Likely	4	5	10	15	20	25
Possible	3	4	8	12	16	20
Unlikely	2	3	6	9	12	15
Very Unlikely	1	2	4	6	8	10
		1	2	3	4	5
Impact:		Negligible	Minor	Moderate	Major	Extreme