



On the following pages, you will find an extensive risk assessment which will provide you with some of the tools to enable your school/setting to operate safely as the country moves to Step 4 of the roadmap (effective 19/07/21). Although it is based mainly on the previous 'Opening and Operating Schools' Risk Assessment (V9), it has been renamed, updated and condensed in line with current guidance so will start again from 'Version 1'.

This risk assessment should be read in conjunction with the [Schools coronavirus \(COVID-19\) operational guidance](#), [Actions for early years and childcare providers during the COVID-19 pandemic](#), [SEND and specialist settings: additional COVID-19 operational guidance](#) and [Covid-19: Actions for Out of School settings](#). This marks 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 the opportunity for two doses of the vaccine, and all children aged 12 and over are now eligible for vaccination. The Government's 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

You should have a contingency plan (also known as an outbreak management plan) outlining how you would operate if there were an outbreak in your school or local area. [See KAHSC model Outbreak Management Plan for thresholds requiring additional control measures](#). Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools should only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible. Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission. The [contingency framework](#) describes the principles of managing local outbreaks of Covid-19 in education and childcare settings. Local authorities, directors of public health (DsPH), United Kingdom Health Security Agency (UKHSA) health protection teams (HPTs) can recommend measures described in the contingency framework in individual education and childcare settings – or a small cluster of settings – as part of their contingency/outbreak management responsibilities. Refer also to the [CCC Public Health Threshold Actions](#).

In most cases the preparation for continuing education from Step 4 will be undertaken by the Head teacher and senior colleagues. However, relevant bodies (such as the LA, academy trusts or governing bodies, depending on the school type) retain responsibility for key decisions and plans should be confirmed with them, particularly risk assessments of the school opening before pupils and staff return. All staff and Trade Union safety representatives should be consulted on the development of, and any changes to, your risk assessment(s). Ensure all persons understand any safety measures, how usual practice may need to be adapted and the safe ways to work together.

Schools will have already assessed the risks and implemented proportionate control measures to limit the transmission of coronavirus (Covid-19).

As part of planning, it is a legal requirement that schools should revisit and update their risk assessments (building on the learning to date and the practices they have already developed), to consider the additional risks and control measures to enable continuing education - this means making judgments at a school level about how to balance minimising any risks from coronavirus (Covid-19) by maximising control measures with providing a full educational experience for children and young people. Settings should also review and update their wider risk assessments and consider the need for relevant revised controls in respect of their conventional risk profile considering the implications of coronavirus (Covid-19). Schools should ensure that they implement sensible and proportionate control measures which follow the health and safety hierarchy of control to reduce the risk to the lowest reasonably practicable level. Essential controls include:

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.

The control measures listed in the following risk assessment are a guide to help and support you. Some of the information can simply be deleted where it does not apply to your setting or where you have devised your own particular control measure to reduce the risks. So, although it may look onerous, much of it is made up of possible practical solutions and measures you will already have considered.

The control measures listed in the following risk assessment are a guide to help and support you. Some of the information can simply be deleted where it does not apply to your setting or

RA Reference	01/02/03/04/05/06/07/08/09/10/11/12/13/14	Activity Description	COVID-19 - Infection Prevention and Control – SCHOOL OPERATIONS
Assessment Date	17.07.2020	Assessor Name	Mr D W Tromans & Mr Mark Walsh
Assessment Team Members	David Tromans, Mark Walsh, Dale Stephenson	Planned Review Date	4.1.2021
Location	Netherhall School	Number Of People Exposed	720 students 76 staff 796 in total
Overall Residual Risk Level following implementation of effective control measures	Medium risk – Step 4 of the Gov roadmap. Recognising the national COVID Alert Level has been reduced to level 3. A COVID-19 epidemic is in general circulation. Gradual relaxing of restrictions and social distancing measures	People Exposed	All employees Pupils Visitors Vulnerable children Persons with pre-existing medical conditions First aiders
Assessment Last Updated	29.11.2021	Is this an acceptable risk?	Yes/ No

Hazard Description and How are people at risk	Current Control Measures (Those that are in place)	Potential Risk	Additional Control Measures (To be identified and implemented)	Action Details by Whom and by When	Residual Risk
An individual develops Covid-19 symptoms or has a positive test	<input type="checkbox"/> Pupils, staff and other adults should follow public health advice on when to self-isolate and what to do . They should not come into school if they have COVID-19 symptoms (a new continual cough, a temperature in excess of 37.8°C or a loss of, or change in their normal sense of taste or smell (anosmia) *), have had a positive PCR test result or other reasons requiring them to stay at home due to the risk of them passing on Covid-19 (e.g. they are required to quarantine). <input type="checkbox"/> If anyone in school develops COVID-19 symptoms , however mild, we will send them home and they should follow public health advice and self-isolate and should arrange to have a test : <input type="checkbox"/> If a child or member of staff tests negative, then they should stay at home until they feel well and at least 2 more days if they have had diarrhoea or vomiting but can safely return thereafter;	High 4x4 = 16	<p>* In addition, if any staff or pupils test positive for Covid-19, public health may advise us to ask pupils to get tested and isolate with a wider range of symptoms, including: headache, diarrhoea, severe fatigue and sore throat.</p> <p>UKHSA has advised that routinely taking the temperature of pupils is not recommended as this is an</p>	<ul style="list-style-type: none"> Additional to encouraged regular hand washing, all classrooms and corridors have been re-introduced with hand sanitizer to reduce the risk of infection and minimise the 	

<p><input type="checkbox"/> If a child or member of staff with symptoms 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 from the day of onset of their symptoms and for the following 10 full days and then return to school only if they do not have a temperature (a cough or anosmia can last for several weeks once the infection has gone). The period of isolation starts from the day they became symptomatic and the following 10 full days. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal;</p> <p><input type="checkbox"/> If a child or member of staff is not experiencing symptoms but has tested positive for Covid-19, they must self-isolate starting from the day the test was taken and the next 10 full days. If symptoms develop during this isolation period, then they must restart the 10-day isolation from the day after symptoms developed.</p> <p><input type="checkbox"/> For everyone with symptoms, they should avoid using public transport and, wherever possible, be collected by a member of their family or household.</p> <p><input type="checkbox"/> If a pupil is awaiting collection, they should 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 PPE should also be used if close contact is necessary, further information on this can be found in the use of PPE in education, childcare and children’s social care settings guidance. Any rooms they use should be cleaned after they have left. A small supply of fluid-resistant surgical face masks should be available.</p> <p><input type="checkbox"/> * Diarrhoea, nausea and vomiting can also be symptoms of COVID-19 (although this is not common). This can sometimes make it difficult to differentiate COVID-19 infection from other common viral infections, such as Norovirus, especially when local case rates of COVID-19 are high. We will follow local Public Health guidance which details the approach that should be taken if an outbreak of diarrhoea and vomiting is suspected within an educational setting during the Covid-19 pandemic.</p> <p>Asymptomatic testing</p> <p><input type="checkbox"/> Testing remains important in reducing the risk of transmission of infection within schools. That is why, whilst some measures are relaxed, others will remain, and if necessary, in response to the latest epidemiological data, we all need to be prepared to step measures up or down in future depending on local circumstances.</p>	<p>unreliable method for identifying Covid-19.</p> <p>Anyone with coronavirus (Covid-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital unless advised to do so.</p> <p>Cumbrian Schools: Telephone the Cumbria Covid-19 Call Centre if we have a positive case of coronavirus in school (staff or pupils). Do NOT give this Tel No. to parents/non-staff. Any queries about a suspected case to be emailed to: EducationIPC@cumbria.gov.uk (inbox monitored by CCC Public Health team Monday to Friday).</p> <p>Refer to CCC Public Health Diarrhoea and vomiting in educational settings over the winter period</p> <p>If we have a positive case of coronavirus in school (adults or pupils) we will report this using the CCC Public Health online reporting system or the ‘Positive Covid-19 case notification/outbreak assessment form’ via email to: EducationIPC@cumbria.gov.uk (inbox monitored by CCC Public Health team Monday to Friday).</p>	<p>spread of covid. All classroom windows opened for additional ventilation purposes.</p> <p>M. Walsh – 17.9.2021</p> <ul style="list-style-type: none"> Following on from recent government guidance on 28.11.2021, the school have re-introduced face coverings in all communal areas of the school to prevent the risk of infection. Face masks are kept on stock and are provided to each classroom. <p>M. Walsh – 29.11.2021</p>
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- ☐ Secondary school pupils should continue to test twice weekly at home, with lateral flow device (LFD) test kits, 3-4 days apart. Testing remains voluntary but is strongly encouraged.
- ☐ Staff should continue to test twice weekly at home with LFD test kits, 3-4 days apart. There is no need for primary age pupils (those in year 6 and below) to test. Testing remains voluntary but is strongly encouraged.
- ☐ We will also retain a small asymptomatic testing site (ATS) on-site until further notice so they can offer testing to pupils who are unable to test themselves at home.

Confirmatory PCR tests

- ☐ Staff and pupils with a positive LFD test result should self-isolate in line with the [stay at home guidance](#). They will also need to [get a free PCR test](#) to check if they have Covid-19.
- ☐ Whilst awaiting the PCR 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, the result overrides the self-test LFD test result and the staff member/pupil can return to school, as long as the individual doesn't have Covid-19 symptoms.

Any queries about Covid-19 can be emailed to the same address. The CCC Coronavirus helpline was taken out of use on 01/09/21.

The CCC Coronavirus helpline will be taken out of use from 1 September 2021.

Refer also to the CCC Public Health [Flow chart: managing positive LFD results](#)

A small supply of fluid-resistant surgical face masks should be available

Refer to: [Secondary schools and colleges document sharing platform](#), [Early years and primary schools document sharing platform](#) and [Rapid asymptomatic testing in specialist settings \(from Step 4\)](#) along with the KAHSC model risk assessments for: [Lateral Flow Device \(LFD\) testing in Secondary/Special Schools](#) and [LFD testing in primary and maintained nursery schools](#)

Refer to [PCR test kits for schools and further education providers](#). School-held PCR test kits should only be offered in the exceptional circumstance an individual becomes symptomatic and you believe they may have barriers to accessing testing elsewhere.

An individual has been identified as a close contact of a positive Covid-19 case

Definition of a Close Contact

- ☐ A contact is a person who has been close to someone who has tested positive for Covid-19. A person can be a contact any time from 2 days before the person who tested positive developed their symptoms (or, if they did not have any symptoms, from 2 days before the date their positive test was taken), and up to 10 days after, as this is when they can pass the infection on to others. A risk assessment may be undertaken to determine this, but a contact can be:
 - ☐ anyone who lives in the same household as another person who has Covid-19 symptoms or has tested positive for Covid-19;
 - ☐ anyone who has had any of the following types of contact with someone who has tested positive for Covid-19:
 - ☐ face-to-face contact including being coughed on or having a face-to-face conversation within 1m
 - ☐ been within 1m for 1 minute or longer without face-to-face contact
 - ☐ been within 2m of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
- ☐ A person may also be a close contact if they have travelled in the same vehicle or plane as a person who has tested positive for Covid-19.

Tracing close contacts and isolation

- ☐ As soon as we are made aware that any member of staff (and this includes all adults working in the school [paid and unpaid]) who may have been in close contact with other staff or pupils, has tested positive for Covid-19, we will report the details to the NHS Self Isolation Service Hub on 020 3743 6715. This will include the 8-digit NHS Test and Trace Account ID (sometimes referred to as a CTAS number) of the person who tested positive, alongside the names of co-workers identified as close contacts.
- ☐ Where we have a pupil who tests positive, we will also report the details of any staff (paid and unpaid) who have been close contacts of the positive case to the NHS Self Isolation Service Hub as above.

**High
4x4 = 16**

Refer to: [Guidance for contacts of people with confirmed coronavirus \(COVID-19\) infection who do not live with the person](#) and [Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)

	<ul style="list-style-type: none"> <input type="checkbox"/> This will ensure that all workplace contacts are registered with NHS Test and Trace and can receive the necessary public health advice, including the support available to help people to self-isolate if necessary. <input type="checkbox"/> In addition to the above, we will report the case via CCC public health online system or complete a ‘Positive Covid-19 case notification/outbreak assessment form’ and submit it to the County Council Public Health Team via EducationIPC@cumbria.gov.uk. <input type="checkbox"/> Close contacts in schools are now identified by NHS Test and Trace and we are no longer expected to undertake contact tracing. <input type="checkbox"/> NHS Test and Trace will work with the positive case and/or their parents to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case and/or their parent specifically identifies the individual as being a 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. We may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. <input type="checkbox"/> Individuals are not required to self-isolate if they live in the same household as someone with Covid-19, or are a close contact of someone with Covid-19, and any of the following apply: <ul style="list-style-type: none"> <input type="checkbox"/> they are fully vaccinated (<i>vaccinated with an MHRA approved Covid-19 vaccine in the UK, and at least 14 days have passed since they received the recommended doses of that vaccine</i>); <input type="checkbox"/> they are below the age of 18 years 6 months; <input type="checkbox"/> they have taken part in or are currently part of an approved Covid-19 vaccine trial; <input type="checkbox"/> they are not able to get vaccinated for medical reasons. <input type="checkbox"/> NHS Test and Trace will contact them to let them know that they have been identified as a contact and check whether they are legally required to self-isolate. If they are not legally required to self-isolate, they will be provided with advice on testing and given guidance on preventing the spread of Covid-19. Even if they do not have symptoms, they will be advised to have a PCR test as soon as possible. We will encourage all individuals to take a PCR test if advised to do so. There is no requirement to self-isolate while awaiting PCR test results and so individuals can attend the setting as usual. <i>Children aged 4 and under will not be advised to take a test</i> 				
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	<p><i>unless the positive case was someone in their own household.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> They should not arrange to have a PCR test if they have previously received a positive PCR test result in the last 90 days, unless they develop any new symptoms of Covid-19, as it is possible for PCR tests to remain positive for some time after Covid-19 infection. <input type="checkbox"/> Staff/other adults who do not need to isolate, and children and young people aged under 18 years 6 months who usually attend school, and have been identified as a close contact, should continue to attend school as normal. They do not need to wear a face covering within the school, but it is expected and recommended that these are worn when travelling on public or dedicated transport. <input type="checkbox"/> If they develop symptoms at any time, even if these are mild, they must self-isolate immediately, arrange to have a PCR test and follow the guidance for people with COVID-19 symptoms. <input type="checkbox"/> Even if they are vaccinated, they can still be infected with Covid-19 and pass it on to others. If they are identified as a contact of someone with Covid-19 but are not required to self-isolate, they can help protect others when not at work/school by following Coronavirus: how to stay safe and help prevent the spread. As well as getting a PCR test, they will be encouraged to follow keeping yourself and others safe by: <ul style="list-style-type: none"> <input type="checkbox"/> limiting close contact with other people outside their household, especially in enclosed spaces; <input type="checkbox"/> wearing a face covering in enclosed spaces and where they are unable to maintain social distancing unless exempt; <input type="checkbox"/> limiting contact with anyone who is clinically extremely vulnerable; <input type="checkbox"/> continuing to practice good hand/respiratory hygiene; <input type="checkbox"/> taking part in twice weekly LFD testing. <input type="checkbox"/> This advice applies until 10 days after their most recent contact with the person who has tested positive for Covid-19 or while any person in their household with Covid-19 is self-isolating. <input type="checkbox"/> 18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the 				
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	<p>opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact (as below).</p> <ul style="list-style-type: none"> <input type="checkbox"/> Those who are contacted by NHS Test and Trace as contacts/household contacts and are still legally required to self-isolate i.e. those over 18 years and 6 months who have not been fully vaccinated (unless unable to get vaccinated for medical reasons), must self-isolate for 10 days from the day after contact with the individual who tested positive. <input type="checkbox"/> We will continue to have a role in working with health protection teams in the case of a local outbreak. If there is a substantial increase in the number of positive cases in our setting or if central government offers our area an enhanced response package, a director of public health might advise us to temporarily reintroduce some control measures. <input type="checkbox"/> Local outbreak threshold levels as determined by the contingency framework at which point we may, in consultation with the DsPH, invoke our Outbreak Management Plan are: <ul style="list-style-type: none"> <input type="checkbox"/> 5 children, pupils or staff, who are likely to have mixed closely, test positive for Covid-19 within a 10-day period; or <input type="checkbox"/> 10% of children, pupils or staff who are likely to have mixed closely test positive for Covid-19 within a 10-day period. <input type="checkbox"/> 2 children, pupils, students and staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period. <p><i>Additional COVID-19 control measures agreed for schools and early years settings in Cumbria from 11/10/21</i></p> <p>Cumbria's Director of Public Health and education leaders have agreed the following local additional advice measures to be implemented from Monday 11/10/2021</p> <p>Omicron Covid Variant</p> <ul style="list-style-type: none"> <input type="checkbox"/> Updated DfE guidance issued on 29/11/21, in response to the Omicron Covid variant, states as a temporary, precautionary measure, all individuals who have been identified as a close contact of a suspected or confirmed case of the Omicron variant of Covid-19, irrespective of vaccination status and age, will be contacted directly and required to self-isolate immediately and asked to book a PCR test. They will be informed by the local health protection team or NHS Test and Trace if they fall into this category and provided with details about self-isolation. <i>These new measures will be reviewed after 3 weeks.</i> 		<p>Cumbria Public Health have developed a range of letter templates depending on whether or not there is an outbreak (with the recommendations different if we have met outbreak threshold) – refer to: CCC Covid-19 resources for schools</p> <p>Refer to KAHSC model Outbreak Management Plan for details on thresholds requiring additional</p>		
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	<p>Guidance for household contacts of positive cases</p> <p><i>Children aged 4 and under</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Parents of children aged 4 and under who are household contacts of a positive case should be asked to keep them at home for 5 days, starting from the onset of symptoms in the household contact who has tested positive (or test date if the positive case had no symptoms). They should only have a PCR test if they develop symptoms of Covid-19. <p><i>Children & young people between the ages of 5 and 18 years + 6 months</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Children and young people between the ages of 5 and 18+6 months (unless exempt – see below), who are household contacts of a positive case, should be advised to stay at home. 5 days following the onset of symptoms in the household contact who has tested positive (or test date if the positive case had no symptoms), the close contact child should get a PCR test. <input type="checkbox"/> If this is negative, they can return to the setting, but should isolate again immediately and get another test if they develop symptoms of Covid-19 at a later date. <input type="checkbox"/> If the 5-day PCR test result is positive (even if the child is asymptomatic), they should follow the advice for people with Covid-19 to self-isolate for a further full 10 days from the date of the positive PCR. This means that their total isolation period will be longer than 10 days. <input type="checkbox"/> Children and young people can be released from the 5 day self-isolation period and can continue to attend the setting while they are waiting for their PCR test (on the 5th day) if they conduct daily Lateral Flow tests, and these remain negative. If they develop symptoms of Covid-19, or receive a positive Lateral Flow test result, they should immediately isolate and get a PCR test. This approach is likely to be the norm for secondary school pupils, but it is also an option for primary school pupils if the parents/carers and school agree. <p><i>Exemptions</i> (refer to advice below for those affected by the Omicron variant)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Children and young people aged between the ages of 5 and 16, (unless exempt – see below) will now be advised to stay at home when a sibling tests positive for COVID-19 (via either a PCR or Lateral Flow test). <input type="checkbox"/> 3 - 5 days following the onset of symptoms in the sibling who has tested positive (or test date if the positive case had no symptoms), the close contact child should get a PCR test. If this is negative, they can return to the setting, but should isolate again immediately and get another test if they develop symptoms of COVID-19 at a later date. 		<p>control measures and the CCC Public Health Threshold Actions</p> <p>Refer to: Cumbria Public Health update for educational settings (23/09/21)</p>		
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- ☐ The groups exempt from this advice and able to continue to attend the setting when identified as a close contact of a positive case are:
- ☐ Any child or young person who have had at least one dose of the vaccine more than 14 days ago;
- ☐ Any child or young person who has tested positive for COVID-19 themselves via a PCR test within the past 90 days.
- ☐ Where there are significant concerns about the impact of exclusion on the child or young person, and a risk assessment indicates that the risks of exclusion to the individual child outweigh the wider benefits.
- ☐ Any parents or carers who still want their child to continue to attend school have the right to send their child into the setting. In these situations, we strongly advise the child or young person identified as a household close contact to get a PCR test before attending the setting.
- ☐ Anyone who develops symptoms of COVID-19 should continue to get a PCR test and stay at home until the result is known. Individuals informed by Test & Trace to isolate should stay at home for the time advised.

In-setting transmission: strengthening control measures

- ☐ Refer to 'Stepping measures up and down' on Page 23.

Close contacts (non-household) – Isolation whilst awaiting PCR test results

- ☐ If we have children or staff within the setting getting a PCR test because they have been identified as a close contact of a positive case (who they DO NOT live with) they do not need to isolate whilst waiting for the test result (unless they have symptoms of COVID-19) and as long as they are exempt for one of the following reasons:
 - ☐ they are fully vaccinated
 - ☐ they are below the age of 18 years 6 months
 - ☐ they are taking part in or are currently part of an approved COVID-19 vaccine trial
 - ☐ they are not able to get vaccinated for medical reasons
- ☐ We are aware that asymptomatic children and fully vaccinated school staff (and their household) have been advised to isolate pending a PCR test result by test centre staff. Cumbria Public Health have checked with the DHSC who have confirmed that the guidance above is still correct.

Omicron Covid Variant

- ☐ Updated DfE guidance issued on 29/11/21, in response to the Omicron Covid variant, states as a temporary, precautionary measure, all individuals who have been identified as a close contact of a suspected or confirmed case of the Omicron variant of Covid-19, irrespective of vaccination status and age, will be contacted directly and required to self-isolate immediately and asked to book a PCR test. They will be informed



<p>Transmission of Covid-19 because of lack of take-up of the vaccination programme for pupils in secondary schools</p>	<p>by the local health protection team or NHS Test and Trace if they fall into this category and provided with details about self-isolation. <i>These new measures will be reviewed after 3 weeks.</i></p> <p>NHS Test and Trace App</p> <ul style="list-style-type: none"> <input type="checkbox"/> The national NHS Test and Trace App can be downloaded by staff/volunteers and students aged 16 and over. The app complements, rather than replaces, existing processes. <input type="checkbox"/> Our approach to this app can be found in our Online Safety Policy which makes clear that use of the NHS Covid-19 app is a limited exception to our normal policy on mobile phones being off and Bluetooth being disabled. There are circumstances where we will advise staff to disable the app during school time such as where the phone is not on the person and/or stored in a locker during the school day. Refer also to 'Lettings' below. <input type="checkbox"/> All children aged 12 and over are now eligible for Covid-19 vaccination. Those aged 12 to 17 are eligible for a first dose of the Pfizer/BioNTech Covid-19 vaccine, although 12 to 17-year olds with certain medical conditions that make them more at risk of serious illness, or who are living with someone who is immunosuppressed, are eligible for 2 doses. These children will be contacted by a local NHS service such as their GP surgery to arrange their appointments. All other 12 to 15 year olds will be offered the vaccine via the school-based programme. Young people aged 16 to 17 will be invited to a local NHS service such as a GP surgery or can access the vaccine via some walk-in COVID-19 vaccination sites. Additional information about the in-school vaccination programme in COVID-19 vaccination programme for children and young people is available in guidance for schools and guidance for parents. 	<p>High 4x4 =16</p>	<p>Refer to Covid-19 vaccination programme for children and young people: guidance for schools and Covid-19 vaccination programme for children and young people: guidance for parents</p> <p>Refer to RCPCH: COVID-19 guidance on CEV children & young people, DFE: Supporting pupils at school with</p>		
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<p>Clinically vulnerable or extremely clinically vulnerable persons returning to school</p>	<p>Pupils</p> <p><i>Pupils who are clinically extremely vulnerable (CEV)</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Clinical studies have shown that children and young people, including those originally considered to be clinically extremely vulnerable (CEV), are at very low risk of serious illness if they catch the virus. The UK Clinical Review Panel has recommended that no children and young people under the age of 18 should no longer be considered CEV and under-18s should be removed from the Shielded Patient List. The chief executive of the UK Health Security Agency and head of NHS Test and Trace has written to parents of these children to inform them. <input type="checkbox"/> Children and young people previously considered CEV should attend school and should follow the same guidance as everyone else. However, if a child or young person has been advised to isolate or reduce their social contact by their specialist, due to the nature of their medical condition or treatment, rather than because of the pandemic, they should continue to follow the advice of their specialist <input type="checkbox"/> For a very few individual children, specific clinical advice may be given and this should continue to be followed. We will provide remote education to pupils who are following specific clinical advice. <input type="checkbox"/> A letter has been sent by the DHSC to the families of children and young people who were previously classified as CEV informing them of this change. Whilst attendance is mandatory, we will work collaboratively with families to reassure them and to help their child return to their everyday activities. Discussions will have a collaborative approach, focusing on the welfare of the child and responding to the concerns of the parent, carer or young person. <p><i>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 clinician or other specialist not to attend.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> We will provide remote education to pupils who are following public health advice. <p><i>Immunisation</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> As normal, we will engage with our local immunisation providers to provide routine immunisation programmes on site, ensuring these will be delivered in keeping with the school's control measures. <p>School workforce</p> <ul style="list-style-type: none"> <input type="checkbox"/> School leaders are best placed to determine the workforce required to meet the needs of their pupils. 	<p>High 4x4 = 16</p>	<p>medical conditions and the DHSC FAQs</p> <p>Refer to COVID-19: guidance on protecting people defined on medical grounds as extremely vulnerable, HSE: Protect vulnerable</p>		
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- ☐ Social distancing measures ended in workplaces on 19 July and the government is no longer advising people to work from home.
- ☐ We will discuss any concerns individuals including those who may be clinically extremely vulnerable, clinically vulnerable or at increased comparative risk from coronavirus, may have around their particular circumstances, reassure staff about the protective measures in place **and review their specific [Individual Risk Assessments](#) with them.**

Staff who are extremely clinically vulnerable (CEV)

- ☐ The shielding programme has now come to an end and adults previously considered clinically extremely vulnerable (CEV) should, as a minimum, continue to follow the same Covid-19 guidance as everyone else. It is important that everyone adheres to this guidance but people previously considered CEV people may wish to consider taking extra precautions. In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice.
- ☐ We will explain the measures we have in place to keep CEV staff safe at work.

Staff who are pregnant

- ☐ We will conduct a risk assessment for new and expectant mothers in line with the Management of Health and Safety at Work Regulations 1999 (MHSW). 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, will be included and managed as part of the general workplace risk assessment.
- ☐ We will follow the [Royal College of Obstetricians and Gynaecology \(RCOG\)](#) guidance and continue to monitor for future updates to it.

Women less than 28 weeks pregnant with no underlying health conditions:

- ☐ We will conduct a workplace risk assessment with each person and occupational health team.
They will only continue working if the risk assessment advises that it is safe to do so. This means that we will remove or manage any risks. If this cannot be done, they will be offered suitable
- ☐ alternative work or working arrangements (including working from home) or be suspended on normal pay.

[workers during the coronavirus \(COVID-19\) pandemic & Talking with your workers about preventing coronavirus \(COVID-19\)](#)

See also [Coronavirus \(COVID-19\): advice for pregnant employees](#) , [RCOG: Coronavirus \(COVID-19\) infection & pregnancy](#) and [COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding](#)

Where necessary, we will provide equipment for people to work at home safely and effectively and guidance on how to work safely at home – refer to the [ACAS Home Working Guide](#), [ACAS Example checklist for setting up homeworking](#) and the [HSE: protect home workers](#)



<p>Inadequate hand and respiratory hygiene leading to spread of Covid-19 virus</p>	<p><input type="checkbox"/> We will support each person with appropriate risk mitigation in line with recommendations to staff arising from workplace risk assessment.</p> <p><u>Women who are 28 weeks pregnant and beyond or with underlying health conditions:</u></p> <p><input type="checkbox"/> Women 28 weeks pregnant and beyond or are pregnant and have an underlying health condition should take a more precautionary approach.</p> <p><input type="checkbox"/> This is because although they are at no more risk of contracting the virus than any other non-pregnant person who is in similar health, they have an increased risk of becoming severely ill and of pre-term birth if they contract Covid-19.</p> <p><input type="checkbox"/> We will ensure they are able to adhere to any active national guidance on social distancing. For many workers, this may require working flexibly from home in a different capacity.</p> <p><input type="checkbox"/> We will consider how to redeploy these staff and how to maximise the potential for homeworking, wherever possible.</p> <p><input type="checkbox"/> Where adjustments to the work environment and role are not possible and alternative work cannot be found, such persons will be suspended on paid leave.</p> <p><i>Staff who may otherwise be at increased risk from coronavirus</i></p> <p>Some people may be at comparatively increased risk from coronavirus (Covid-19). Staff who feel they may be at increased risk but who have not been identified as CEV can return to school. We will review their individual risk assessments with them (as above).</p> <p><input type="checkbox"/> Frequent and thorough hand cleaning is now regular practice. We will continue to ensure that pupils clean their hands regularly with soap and water or hand sanitiser including before leaving home, on arrival at school, on return from breaks, when they change rooms and before and after handling cleaning chemicals, eating/drinking, using the toilet, sports activities, using public transport and after coughing or sneezing and not to touch face (eyes, mouth, nose) with hands that are not clean.</p>	<p>High 4x4 = 16</p>	<p>We have built these routines into school culture, supported by behaviour expectations.</p>		
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	<ul style="list-style-type: none"> <input type="checkbox"/> Wash with liquid soap & water for a minimum of 20 seconds. Alcohol based hand cleansers/gels (containing at least 60% alcohol) can be used if soap and water are not available or practical. We will continue to ensure there are sufficient hand washing or hand sanitiser 'stations' available throughout school for staff and pupils and at the main entrance and dining hall entrance. <input type="checkbox"/> We will ensure supervision of hand sanitiser use given the risks around ingestion. Young children and pupils with complex needs will continue to be helped to clean their hands properly - songs and rhymes will be used to encourage hand washing in early years. Skin friendly skin cleaning wipes can be used as an alternative. <input type="checkbox"/> Toilets will be cleaned regularly and pupils encouraged to clean their hands thoroughly after using the toilet. <input type="checkbox"/> The 'catch it, bin it, kill it' approach will continue. Everyone will be reminded to sneeze into a tissue or sleeve NEVER into hands and to wash hands immediately after (as above). 'Catch it, bin it, kill it' posters to be displayed in relevant areas. <input type="checkbox"/> Used tissues will be put in a bin immediately - all waste bins to be lined (they do NOT need to be double lined) and should be lidded and foot operated where possible and emptied regularly. <input type="checkbox"/> As with hand cleaning, we will 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. <input type="checkbox"/> Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, e.g. those who spit uncontrollably or use saliva as a sensory stimulant. This will be considered in risk assessments in order to support these pupils and the staff working with them – they will be given more opportunities to wash their hands. <p>Where it is necessary for first aid to be administered in close proximity, treating any casualty properly should be the first concern. Those administering it should pay particular attention to sanitation measures immediately afterwards, including washing hands.</p>		<p>Alcohol-based hand gels should not be used in science labs or D&T & Food workshops/lessons. Schools should not make their own gels. Instead of gels, use skin-friendly cleaning wipes that claim to kill 99.99% of bacteria and viruses & are non-alcohol based. Refer also to 'Fire Emergencies' on Page 26.</p> <p>We will ensure there are enough tissues and bins available to support pupils and staff to follow the 'Catch it, bin it, kill it' routine</p> <p>The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage good hand and respiratory hygiene</p> <p>Refer to HSE: First aid during Covid-19</p>		
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Inadequate ventilation leading to spread of Covid-19 virus

When the school is in operation, it is important to ensure the building is well ventilated and a comfortable teaching environment is maintained. We will identify any poorly ventilated spaces as part of our risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where visitors such as parents are on site, e.g. school plays. The British Occupational Hygiene Society (BOHS) has developed a simple tool for assessing general ventilation and Covid-19 transmission: [Ventilation Tool – Breathe Freely](#). This can be achieved by a variety of measures including:

- ☐ **Increasing natural ventilation** – opening external windows and, in addition, opening internal doors can also assist with creating a throughput of air – with regard ‘fire doors’ refer to ‘Fire Emergencies’ on Page 30 and November 2021 Cumbria County Council Guidance [‘Improving ventilation during COVID-19’](#);
- ☐ if necessary external opening doors may also be used (where safe to do so).
- ☐ **Mechanical ventilation systems** – continue using most types of mechanical ventilation as normal and set them to fresh air intake and switch off recirculating air modes;
- ☐ switch ventilation on at nominal speed at least 2 hours before, and at lower speed 2 hours after people use work areas;
- ☐ at nights and weekends, do not switch ventilation off but keep systems running at a lower speed;
- ☐ ensure mechanical systems/ducts/heat recovery equipment are inspected, maintained, filters replaced, defects addressed, and regularly cleaned in line with manufacturers’ instructions;
- ☐ toilets with mechanical extraction – keep doors closed and extraction operating as normal 24/7.
- ☐ **Recirculating air** - Mechanical systems supplying individual rooms should be allowed to operate with recirculation modes switched to supply 100% outdoor air where possible;
- ☐ For centralised ventilation system that circulates air to different rooms, it is recommended that recirculation is turned off and fresh air supply used;
- ☐ recirculation units for heating and cooling that do not draw in a supply of fresh air can remain in operation provided there is a supply of outdoor air, e.g. windows and doors left open.

Medium
3x3 = 9

Refer to the [HSE: Ventilation & air conditioning during the coronavirus \(COVID-19\) pandemic](#) and [CIBSE coronavirus \(COVID-19\) advice](#)

Government will begin to roll out [carbon dioxide monitors](#) to education settings in England over the Autumn term, to quickly identify where ventilation may need to be improved. The programme will provide sufficient monitors to take readings from across indoor spaces, providing reassurance that existing ventilation measures are working, and helping balance the need for good ventilation with keeping classrooms warm. A trial of air purifiers is also underway.



<p>Inadequate personal protection & PPE & spread of Covid-19 virus</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Fans and air cleaning units - in collective spaces, i.e. when several people are present in the space, the use of fans for air circulation/cooling is not advised, particularly in small volume, closed or partially open spaces with minimal outside air exchange; <input type="checkbox"/> desk or ceiling fans should only be used provided the area is well ventilated; <input type="checkbox"/> the use of fans is advised where there is only one person in a room; <input type="checkbox"/> if fans are used, you must take steps to minimise air from fans blowing from one person directly at another to reduce the potential spread of any airborne viruses. <input type="checkbox"/> To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures will also be used as appropriate: <ul style="list-style-type: none"> <input type="checkbox"/> opening high level windows in preference to low level to reduce draughts; <input type="checkbox"/> increasing the ventilation while spaces are unoccupied (e.g. 10 – 15 minutes before a classroom is occupied, between classes, during break and lunch, when a room is unused); <input type="checkbox"/> opening windows for short bursts of 10 – 15 minutes every hour throughout the day or leaving windows open a small amount (approx.. 3cm) continuously; <input type="checkbox"/> providing flexibility to allow additional, suitable indoor clothing; <input type="checkbox"/> rearranging furniture where possible to avoid direct drafts; setting the heating to maintain a comfortable temperature even when windows and doors are open. <input type="checkbox"/> Face masks must be worn in all communal areas and corridors of the school. <input type="checkbox"/> We have reviewed tasks in school which require PPE like first aid, intimate care, cleaning, food preparation etc. and identified where we need extra equipment (like visors where splashing to the eyes is a new significant risk) or more of it (because we change it more often). Where PPE is required, staff have been trained in and must scrupulously follow the guidance how to put PPE on and take it off safely to reduce cross and self-contamination. <input type="checkbox"/> Most staff will not require PPE beyond what they would normally need for their work. 	<p>High 4x4 = 16</p>	<p>Refer to: Use of PPE in education, childcare and children’s social care settings including AGPs</p> <p>Ensure adequate bins (lidded and foot operated where possible) and tissues are made available. Ensure school has a stock of rubber gloves</p>	
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	<ul style="list-style-type: none"> <input type="checkbox"/> Where a child or young person already has routine intimate care needs that involve the use of PPE, the same PPE will continue to be used. <input type="checkbox"/> Additional PPE is only needed in a very small number of scenarios, including: <ul style="list-style-type: none"> <input type="checkbox"/> where an individual child or young person becomes ill with coronavirus (Covid-19) symptoms and only then if close contact is necessary; <input type="checkbox"/> when performing aerosol generating procedures (AGPs). <input type="checkbox"/> Depending on how close you need be to an individual with Covid-19 symptoms you may need the following PPE: <ul style="list-style-type: none"> <input type="checkbox"/> fluid-resistant surgical face masks (also known as Type IIR) <input type="checkbox"/> disposable gloves <input type="checkbox"/> disposable plastic aprons <input type="checkbox"/> eye protection (for example, a face visor or goggles) <input type="checkbox"/> How much PPE you need to wear when caring for someone with symptoms of Covid-19 depends on how much contact you have: <ul style="list-style-type: none"> <input type="checkbox"/> A face mask should be worn if you are in face-to-face contact. <input type="checkbox"/> If physical contact is necessary, then gloves, an apron and a face mask should be worn. <input type="checkbox"/> Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, e.g. from coughing, spitting or vomiting. <input type="checkbox"/> Staff dealing with children with complex medical needs have an increased risk of transmission through aerosols being transferred from the child to the care giver. Staff performing tracheostomy care and other similar procedures will follow the Public Health advice and refer to Use of PPE in education, childcare and children's social care settings including AGPs which specifically covers Aerosol generating procedures (AGPs), and wear the correct PPE which is: <ul style="list-style-type: none"> <input type="checkbox"/> a FFP2/3 respirator (which must be fit-tested) <input type="checkbox"/> gloves <input type="checkbox"/> a long-sleeved fluid repellent gown <input type="checkbox"/> eye protection 		<p>and if needed, disposable gloves/aprons/facemasks.</p>		
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	<p><input type="checkbox"/> When changing children, and where the child can understand, ask the child to turn their head to the side during the changing process.</p> <p>Face Coverings</p> <p><input type="checkbox"/> Face coverings will be worn in communal areas in all settings by staff, visitors and pupils or students in year 7 and above, unless they are exempt.</p> <p><input type="checkbox"/> <i>Pupils or students (in year 7 or above) should continue to wear face coverings on public and dedicated school transport unless they are exempt.</i></p> <p><input type="checkbox"/> We will ensure that key contractors are aware of the school's control measures and ways of working.</p> <p><i>In circumstances where face coverings are recommended</i></p> <p><input type="checkbox"/> If we have a substantial increase in the number of positive cases in our school, a Director of Public Health might advise us that face coverings should temporarily be worn in communal areas, classrooms or both (by pupils, staff and visitors, unless exempt). Our Outbreak Management Plan covers this possibility.</p> <p><input type="checkbox"/> In these circumstances, transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Transparent face coverings may be effective in reducing the spread of Covid-19, however, the evidence to support this is currently very limited. Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles.</p> <p><input type="checkbox"/> Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They will only be used after carrying out a risk assessment for the specific situation and will always be cleaned appropriately.</p> <p><input type="checkbox"/> We will make reasonable adjustments for disabled pupils to support them to access education successfully. Where appropriate, we will discuss with pupils and parents the types of</p>		<p>A displayed poster which the children can describe may assist with this.</p> <p>Refer to: face coverings including when to wear one, exemptions and how to make your own</p> <p>Ensure there is a small supply of face coverings available in school. From 4 October Cumbria CC are arranging for supplies of free face coverings to be delivered to all secondary schools, special schools and PRUs for use by staff and students. These face coverings are NOT suitable for wider use as PPE during LFT testing or similar close contact interventions.</p> <p>The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who communicate with or provide support to those who do, are exempt from any recommendation to wear face coverings in education and childcare settings.</p>		
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	<p>reasonable adjustments that are being considered to support an individual.</p> <ul style="list-style-type: none"> <input type="checkbox"/> No pupil or student will be denied education on the grounds of whether they are, or are not, wearing a face covering. Children under the age of 3 should not wear face coverings. <input type="checkbox"/> Face coverings do not need to be worn when outdoors. <p>Safe wearing and removal of face coverings</p> <ul style="list-style-type: none"> <input type="checkbox"/> Our Outbreak Management Plan already covers a process for when face coverings are worn within the school and how they should be removed. We will communicate this process clearly to pupils, staff and visitors and allow for adjustments to be made for pupils who may be distressed if required to remove a face covering against their wishes, particularly those with SEND. <input type="checkbox"/> When wearing a face covering, staff, visitors and pupils should: <ul style="list-style-type: none"> <input type="checkbox"/> wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on; <input type="checkbox"/> avoid touching the part of the face covering in contact with the mouth and nose, as it could be contaminated with the virus; <input type="checkbox"/> change the face covering if it becomes damp or if they've touched the part of the face covering in contact with the mouth and nose; <input type="checkbox"/> avoid taking it off and putting it back on a lot in quick succession to minimise potential contamination. <input type="checkbox"/> When removing a face covering, staff, visitors and pupils should: <ul style="list-style-type: none"> <input type="checkbox"/> wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser before removing; <input type="checkbox"/> only handle the straps, ties or clips; <input type="checkbox"/> not give it to someone else to use; <input type="checkbox"/> if single-use, dispose of it carefully in a household waste bin and do not recycle; <input type="checkbox"/> once removed, store reusable face coverings in a plastic bag until there is an opportunity to wash them; <input type="checkbox"/> if reusable, wash it in line with manufacturer's instructions at the highest temperature appropriate for the fabric; <input type="checkbox"/> wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser once removed. <p><i>Omicron Covid Variant</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Following the Downing Street Press Conference on 27/11/21, in response to the Omicron Covid variant, as a temporary, precautionary measure, face coverings will again be mandatory (unless exempt) in shops and on public transport in England. <i>These new measures will be reviewed after 3 weeks.</i> 			
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<p>Inadequate cleaning measures leading to spread of Covid-19 virus</p>	<p>Cleaning non-healthcare settings where no-one has symptoms of, or confirmed Covid-19</p> <p><i>Cleaning and disinfection</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> We will reduce clutter and remove difficult to clean items to make cleaning easier. <input type="checkbox"/> Increase the frequency of cleaning, using standard cleaning products such as detergents and bleach, paying attention to all surfaces but especially ones that are touched frequently, such as door handles, light switches, work surfaces, remote controls and electronic devices. <input type="checkbox"/> As a minimum, frequently touched surfaces should be wiped down twice a day, and one of these should be at the beginning or the end of the working day. Cleaning should be more frequent depending on the number of people using the space, whether they are entering and exiting the setting and access to handwashing and hand-sanitising facilities. Cleaning of frequently touched surfaces is particularly important in bathrooms and communal kitchens. <input type="checkbox"/> When cleaning surfaces, it is not necessary to wear personal protective equipment (PPE) or clothing over and above what would usually be used. <p><i>Laundry</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Items should be washed in accordance with the manufacturer's instructions. <input type="checkbox"/> There is no additional washing requirement above what would normally be carried out. <p><i>Kitchens and communal canteens</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> It is very unlikely that Covid-19 is transmitted through food. However, as a matter of good hygiene practice, anyone handling food will wash their hands often with soap and water for at least 20 seconds before doing so. <input type="checkbox"/> Crockery and eating utensils should not be shared. <input type="checkbox"/> Clean frequently touched surfaces regularly. <input type="checkbox"/> Catering staff will continue to follow the Food Standard Agency's (FSA) guidance on good hygiene practices in food preparation, Hazard Analysis and Critical Control Point (HACCP) processes, and preventative practices (pre-requisite programmes (PRPs)). 	<p>High 4x4 = 16</p>	<p>Refer to PHE COVID-19: cleaning of non-healthcare settings outside the home</p> <p>Refer to UKHSA COVID-19: cleaning in non-healthcare settings outside the home</p> <p>Carry out inventory check of cleaning products and stock at regular intervals. Ensure contingency plans are in place to respond to any shortages in supply.</p>		
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<p><i>Bathrooms</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Clean frequently touched surfaces regularly. <input type="checkbox"/> Ensure suitable hand washing facilities are available including running water, liquid soap and paper towels or hand driers. <input type="checkbox"/> Where cloth towels are used, these should be for individual use and laundered in accordance with washing instructions. <p><i>Waste</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Waste does not need to be segregated unless an individual in the setting shows symptoms of or tests positive for Covid-19 (see below). <input type="checkbox"/> Dispose of routine waste as normal, placing any used cloths or wipes in ‘black bag’ waste bins. You do not need to put them in an extra bag or store them for a time before throwing them away. <p>Cleaning after an individual with symptoms of, or confirmed Covid-19 has left the setting or area</p> <p><i>Personal protective equipment (PPE)</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> The minimum PPE to be worn for cleaning an area after a person with symptoms of or confirmed Covid-19 has left the setting is disposable gloves and an apron. <input type="checkbox"/> Wash hands with soap and water for 20 seconds after all PPE has been removed. <input type="checkbox"/> If a risk assessment of the setting indicates that a higher level of virus may be present (e.g. where someone unwell has spent the night such as in a hotel room or boarding school dormitory) then additional PPE to protect the cleaner’s eyes, mouth and nose may be necessary. The UKHSA Health Protection Team can advise on this. <p><i>Cleaning and disinfection</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Public areas where a symptomatic person has passed through and spent minimal time but which are not visibly contaminated with body fluids, such as corridors, can be cleaned thoroughly as normal. <input type="checkbox"/> All surfaces that the symptomatic person has come into contact with should be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as bathrooms, door handles, door push plates, work surfaces, computer keyboards/mice, telephones, grab rails in corridors/bannisters, stairwells. 	<div style="background-color: #FFD700; height: 100%; width: 10px;"></div>	<p>Refer to Coronavirus (Covid-19): Disposing of waste</p> <p>Refer to COVID-19: personal protective equipment use for non-aerosol generating procedures</p>

- ☐ Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction. Use one of the options below:
- ☐ a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm av.cl.); or
- ☐ 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; or
- ☐ if an alternative disinfectant is used within the organisation ensure that it is effective against enveloped viruses.
- ☐ Avoid mixing cleaning products together as this can create toxic fumes.
- ☐ 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.
- ☐ When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

Laundry

- ☐ Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely.
- ☐ Dirty laundry that has been in contact with an unwell person can be washed with other people's items.
- ☐ To minimise the possibility of dispersing virus through the air, do not shake dirty laundry prior to washing.
- ☐ Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

Waste

- ☐ Personal waste from individuals with symptoms of Covid-19 and waste from cleaning of areas where they have been (including PPE, disposable cloths and used tissues):
- ☐ should be put in a plastic rubbish bag and tied when full
- ☐ the plastic bag should then be placed in a second bin bag and tied
- ☐ this should be put in a suitable and secure place and marked for storage until the individual's test results are known



<p>Inappropriate arrangements for opening the school to pupil groups</p>	<ul style="list-style-type: none"> <input type="checkbox"/> This waste should be stored safely and kept away from children. It should not be placed in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours. If possible, keep an area closed off and secure for 72 hours. <input type="checkbox"/> If the individual tests negative, this can be disposed of immediately with the normal waste. <input type="checkbox"/> If Covid-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste. <input type="checkbox"/> If during an emergency you need to remove the waste before 72 hours, it must be treated as Category B infectious waste. You must: <ul style="list-style-type: none"> <input type="checkbox"/> keep it separate from your other waste <input type="checkbox"/> arrange for collection by a specialist contractor as hazardous waste <p>There will be a charge for this service.</p> <input type="checkbox"/> Other household waste can be disposed of as normal. <input type="checkbox"/> Any items that are heavily contaminated with body fluids and cannot be cleaned by washing will be disposed of. <p>Mixing and 'bubbles'</p> <ul style="list-style-type: none"> <input type="checkbox"/> At Step 4, it is no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). Bubbles will not need to be used in school from the autumn term. <input type="checkbox"/> As well as enabling flexibility in curriculum delivery, this means that assemblies can resume, and we no longer need to make alternative arrangements to avoid mixing at lunch. <input type="checkbox"/> Our Outbreak Management Plan covers the possibility that in some local areas it may become necessary to reintroduce 	<p>High 4x4 = 16</p>	<p>Refer to RCPCH: COVID-19 guidance on CEV children & young people and DFE: Supporting pupils at school with medical conditions</p>		
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<p>‘bubbles’ for a temporary period, to reduce mixing between groups.</p> <ul style="list-style-type: none"> Any decision to recommend the reintroduction of ‘bubbles’ will not be taken lightly and will need to take account of the detrimental impact they can have on the delivery of education. <p>School meals</p> <ul style="list-style-type: none"> We will continue to provide meal options for all pupils who are in school. Meals will be available free of charge to all infant pupils and pupils who are eligible for benefits-related free school meals who are in school. Meals served should meet the school food standards, and where possible a hot meal should be available. We will also continue to provide free school meal support to pupils who are eligible for benefits related free school meals and who are learning from home during term time by providing good quality lunch parcels or vouchers. <p>Transport</p> <p><u>Dedicated school transport, including statutory provision and the use of school minibuses</u></p> <ul style="list-style-type: none"> We no longer need to keep children in consistent groups/bubbles or be responsible for tracing close contacts of those who test positive for Covid-19. 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 an individual may come into contact with people they don’t normally meet. On dedicated transport children and young people aged 11 and over will be expected to wear a face covering when travelling to secondary school or college. Maximising distancing and minimising mixing are no longer recommended, but unnecessary risks such as overcrowding will be minimised. Our Outbreak Management Plan covers the possibility that in some local areas it may become necessary to temporarily reintroduce bubbles to reduce mixing for a temporary period. We will continue to ensure frequent and thorough hand cleaning with soap and running water or hand sanitiser. 		<p>Refer to: Providing school meals during the coronavirus (COVID-19) outbreak & KAHSC model Delivering Lunch Parcels Risk Assessment</p> <p>Refer to: Dedicated transport to schools and colleges Covid-19 operational guidance, KAHSC model Covid-19 Home to school (school commissioned) transport Risk Assessment and Protocol for using the School minibus to transport students during the Covid-19 pandemic</p>	
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- ☐ The 'catch it, bin it, kill it' approach continues to be very important.
- ☐ Most staff will not normally require PPE on home to school transport, however, where the care and interventions that a child or young person ordinarily receives on home to school transport requires the use of PPE, that should continue as usual.
- ☐ Fresh air (from outside the vehicle) through ventilation will be maximised, particularly through opening windows and ceiling vents.
- ☐ We will put in place and maintain an appropriate cleaning schedule with a particular focus on frequently touched surfaces.

Wider public transport

- ☐ We will continue to encourage children, parents, carers and staff to walk, cycle or scoot to and from the setting, wherever it is possible and safe to do so. Where children, parents, carers and staff need to use public transport, they should follow the [Coronavirus \(COVID-19\): safer travel guidance for passengers](#).
- ☐ 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 you may come into contact with people you don't normally meet - this includes public transport.

Other considerations

- ☐ Pupils with SEND will receive specific help with the changes to routine they are experiencing, so teachers and SENCo's will plan to meet these needs, e.g. using social stories.
- ☐ Where a pupil or student has an EHC plan the local authority and (if there is health provision) health commissioning body must secure or arrange the provision specified in the plan.
- ☐ At times it may be necessary to conduct some aspects of EHC needs assessments and reviews in different ways, e.g. because children or young people are isolating. It is important that the assessments and reviews continue to ensure that the child or young person, and their parent and carer, is at the centre of the process and can engage with the process in a meaningful way.

Refer to [Supporting pupils and students with SEND](#)

DfE [Supporting Pupils at School with Medical Conditions](#) remains in place

	<ul style="list-style-type: none"> <input type="checkbox"/> As well as the duty to secure or arrange provision in an EHC plan, we must meet all the statutory duties relating to EHC needs assessments and annual reviews. It is important that we co-operate in supporting requests about potential placements, providing families with advice and information where requested. <input type="checkbox"/> Specialists, therapists and other professionals should provide interventions as usual. <p>Wraparound care provision, holiday clubs and extra-curricular activity including out-of-school sports provision</p> <ul style="list-style-type: none"> <input type="checkbox"/> All children may access out-of-school settings, wraparound care and extra-curricular provision; activities may take in groups of any size and it is no longer recommended that it is necessary to keep children in consistent groups ('bubbles'). <input type="checkbox"/> Our Outbreak Management Plan covers the possibility that in some local areas it may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups. <input type="checkbox"/> Our provision will ensure they are following the same protective measures being taken by school during the day and work with school to follow our arrangements. <input type="checkbox"/> When caring for children: <input type="checkbox"/> under 5 years only - refer to the Actions for Early years and childcare providers <input type="checkbox"/> both under 5 years and aged 5 years and over, in mixed groups together, should follow this guidance. <input type="checkbox"/> Where we operate our setting in a shared space, we will have regard to relevant guidance for operators of shared spaces, such as Working safely during Covid-19, Coronavirus: how to stay safe and help prevent the spread and for places of worship and discuss any protective measures with the owner of the space. <input type="checkbox"/> All sports provision, including competition between settings can be planned and delivered. Refer to 'PESSPA' below. <input type="checkbox"/> We will follow the same protective measures as listed under 'Music, Dance and Drama' below for these out-of-school activities. 		<p>Refer to COVID-19: Actions for Out of School Settings</p> <p>The owners of these shared spaces must continue to meet all existing health and safety obligations with regard to ensuring that their premises are safe for providers to hire and to operate from</p>		
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Inappropriate arrangements for managing the curriculum

Parental Attendance

- ☐ It is no longer advised that providers limit the attendance of parents and carers at sessions. We will continue to ensure that we have parents' and carers' most up-to-date contact details in case of an emergency.

Educational visits & trips

Out-of-school settings and wraparound childcare providers may undertake educational visits in groups of any number and children will no longer need to be kept in consistent groups. Refer to 'Educational Visits' on Page 26 for further details.

Physical Education, School Sport and Physical Activity (PESSPA)

- ☐ All sports provision, including competition between settings can be planned and delivered whilst following the measures in our system of controls.
- ☐ We will follow the guidance contained in [Guidance on coronavirus \(COVID-19\) measures for grassroots sport participants, providers and facility operators](#).
- ☐ If delivering sporting or other organised events, more information can be found in [COVID-19: Organised events guidance](#).

Science, Art and D&T

- ☐ For guidance regarding Science and D&T in relation to practical activities during the Covid-19 pandemic, we will follow relevant CLEAPSS guidance. Although specific risk assessments will not be required, our existing curricular risk assessments will be reviewed and where necessary updated to reflect altered practices and CLEAPSS guidance.
- ☐ If we have a substantial increase in the number of positive cases in our school, a Director of Public Health might advise us that additional controls need to be reintroduced. Our Outbreak Management Plan covers this possibility.

Music, Dance and Drama

- ☐ We will continue teaching music, dance and drama as part of the school curriculum.

**High
4x4 = 16**

Refer to:

- [Guidance on coronavirus \(COVID-19\) measures for grassroots sport participants, providers and facility operators](#)
- [Sport England](#)
- [Youth Sport Trust](#)
- [Association for Physical Education \(AfPE\)](#)
- [Swim England](#)

Refer to: CLEAPSS [GL344](#) and [GL343](#)

Refer to CLEAPSS guidance for **D&T:** [GL347](#), [GL348](#), [GL354](#), [GL355](#), [GL360](#), [GL356](#) & [GL362](#) and **Science:** [GL336](#), [GL338](#), [GL339](#), [GL345](#), [GL352](#), [GL353](#) & [GL362](#)

Refer to [Working safely during COVID-19 in events and attractions including performing arts](#)



<p>Inappropriate arrangements for education recovery</p>	<p><input type="checkbox"/> Singing, wind and brass instrument playing can be undertaken in line with performing arts guidance ensuring we provide adequate ventilation and clean more frequently.</p> <p><i>Performances</i></p> <p>If planning indoor or outdoor face-to-face performances, sporting or other organised events in front of a live audience, we will follow the latest advice in the COVID-19: Organised events guidance, which provides details of how to manage audiences as well as carry out performing arts safely.</p> <p>There are a number of programmes and activities to support pupils to make up education missed as a result of the pandemic. Further information is available on education recovery support. Specifically, for schools, the document includes further information on:</p> <ul style="list-style-type: none"> <input type="checkbox"/> catch-up premium <input type="checkbox"/> recovery premium <input type="checkbox"/> tutoring (including the National Tutoring Programme and 16 to 19 tuition fund) <input type="checkbox"/> teacher training opportunities <input type="checkbox"/> curriculum resources <input type="checkbox"/> curriculum planning <input type="checkbox"/> specialist settings <input type="checkbox"/> wider continuous professional development resources, including to support teacher wellbeing and subject-specific teaching <p>Special schools and other specialist settings should refer to the SEND additional operational guidance.</p>	<p>High 4x4 = 16</p>			
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<p>Inadequate contingency plans in place</p>	<p>Stepping measures up and down</p> <ul style="list-style-type: none"> <input type="checkbox"/> Currently, early years settings, schools and colleges are advised to contact their Local Authority for advice when they reach specific thresholds described in the Contingency Framework. Local Authorities can then advise further measures that settings can take to reduce in-setting transmission of COVID-19. <input type="checkbox"/> In order to support settings in managing outbreaks and in-setting transmission, an enhanced version of the framework has been produced for Cumbria (refer to CCC Public Health Threshold Actions). This framework aims to provide a clear range of step-up, step down measures that settings can consider depending on the assessed severity of the COVID-19 situation being experienced. We will continue to email the Education IPC team at Cumbria County Council for advice on managing cases and outbreaks: EducationIPC@cumbria.gov.uk <input type="checkbox"/> We have an Outbreak Management Plan outlining what we would do if children, pupils, students or staff test positive for Covid-19, or how we would operate if we were advised to take extra measures to help break chains of transmission. Any measures in schools will only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible. <input type="checkbox"/> Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission. <input type="checkbox"/> We have thought about taking extra action if the number of positive cases substantially increases. Information on what circumstances might lead us to consider taking additional action, and the steps we should work through, can be found in the Contingency framework. <input type="checkbox"/> We will call the LA Public Health Team who will advise if any additional action is required, such as implementing elements of our contingency (or outbreak management) plan. <p>Remote education</p> <ul style="list-style-type: none"> <input type="checkbox"/> Not all people with Covid-19 have symptoms. Where appropriate, we will support those who need to self-isolate because they have tested positive to work or learn from home if they are well enough to do so. <input type="checkbox"/> Schools affected by the Remote Education Temporary Continuity Direction are still required to provide remote education to pupils covered by the direction where their attendance would be 	<p>High 4x4 = 16</p>	<p>Refer to the Contingency framework, the KAHSC model Outbreak Management Plan and the CCC Public Health Threshold Actions</p> <p>Refer to: Remote Education Temporary Continuity (No.2) Direction Explanatory Note</p> <p>Refer to:</p>		
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<p>Poor or inappropriate behaviour and attendance</p>	<p>contrary to government guidance or legislation around coronavirus (Covid-19).</p> <ul style="list-style-type: none"> <input type="checkbox"/> We will maintain our capacity to deliver high quality remote education for next academic year, including for pupils who are abroad, and facing challenges to return due to Covid-19 travel restrictions, for the period they are abroad. <input type="checkbox"/> Independent Schools (not including academies) are only covered by the remote education temporary continuity direction in relation to state-funded pupils in their schools. However, they are still expected to meet the Independent School Standards in full at all times. <input type="checkbox"/> The remote education provided will be equivalent in length to the core teaching pupils would receive in school. <input type="checkbox"/> We will work collaboratively with families and put in place reasonable adjustments so that pupils with SEND can successfully access remote education. <input type="checkbox"/> We will keep in contact with students learning from home and regularly check if they are accessing remote education. <input type="checkbox"/> For pupils self-isolating who ate within the definition of vulnerable we will notify their social worker (if they have one) and agree the best way to maintain contact and offer support. <p>Our Offer of Remote Education is available to all pupils/parents and is displayed on the school website.</p> <p>Behaviour</p> <ul style="list-style-type: none"> <input type="checkbox"/> Our Behaviour policy has been updated with any new rules/policies and will be communicated clearly and consistently to staff, pupils and parents, setting clear, reasonable and proportionate expectations of pupil behaviour both in school and online. We will set out clearly the consequences for poor behaviour and deliberately 	<p>High 4x4 = 16</p>	<ul style="list-style-type: none"> • Get help with remote education • Keeping children safe online • Adapting teaching practice for remote education • Review your remote education provision • Get help with technology for remote education during coronavirus (Covid-19) • Remote education good practice guide • Support for parents and carers to keep children safe online • Remote education webinars • Safe Remote Learning knowledge base and Live Remote Lessons by SWGfL • Safeguarding during Remote Learning and Lockdowns by LGfL • The National Cyber Security Centre: Video conferencing services: security guidance & Video conferencing services: using them securely • Safeguarding and remote education during coronavirus (COVID-19) • Home Learning Technology Guidance <p>Keeping children safe in education</p> <p>Refer to the DfE Checklist for school leaders to support full opening: behaviour and attendance</p>		
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	<p>breaking the rules and how we will enforce those rules including any sanctions.</p> <ul style="list-style-type: none"> <input type="checkbox"/> We will work with staff, pupils and parents to ensure that behaviour expectations are clearly understood, and consistently supported, taking account of individual needs and we will also consider how to build new expectations into our rewards system. <input type="checkbox"/> It is likely that adverse experiences and/or lack of routines of regular attendance and classroom discipline may contribute to disengagement with education upon return to school, resulting in increased incidence of poor behaviour. We will work with those pupils who may struggle to reengage in school and are at risk of being absent and/or persistently disruptive, including providing support for overcoming barriers to attendance and behaviour and to help them reintegrate back into school life. <p>Some pupils will return to school having been exposed to a range of adversity and trauma including bereavement, anxiety and in some cases increased welfare and safeguarding risks. This may lead to an increase in social, emotional and mental health concerns and some children, particularly</p> <ul style="list-style-type: none"> <input type="checkbox"/> vulnerable groups such as children with a social worker, previously looked-after children who left care through adoption or special guardianship and young carers, will need additional support and access to services such as educational psychologists, social workers, and counsellors. Additionally, provision for children who have SEND may have been disrupted during partial school closure and there may be an impact on their behaviour. We will work with local services (such as health and the LA) to ensure the services and support are in place for a smooth return to schools for pupils. <input type="checkbox"/> The disciplinary powers that schools currently have, including suspension and exclusion, remain in place. Exclusion will only be used as a last resort and must be lawful, reasonable and fair. <input type="checkbox"/> Where a child with a social worker is at risk of exclusion, their social worker will be informed and involved in relevant conversations. <input type="checkbox"/> We will, as far as possible, avoid permanently excluding any pupil with an EHC plan, or a looked-after child. Where a looked-after 		<p>Refer to: Changes to the school suspension and permanent exclusion process during the coronavirus (COVID-19) outbreak</p>		
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	<p>child is at risk of suspension or exclusion, the designated teacher should contact the relevant authority's virtual school head as soon as possible to help the school decide how to help the child and avoid exclusion becoming necessary.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Where a previously looked-after child is at risk of exclusion, the designated teacher will speak with the child's parent or guardian and seek advice from their virtual school head. <input type="checkbox"/> Pre-empting that a pupil may commit a disciplinary offence, and thus not allowing a pupil to attend school, is an unlawful exclusion. <input type="checkbox"/> Any disciplinary exclusion of a pupil, even for short periods of time, must be consistent with the relevant legislation. This includes sending a pupil home for poor behaviour, whether or not remote education is provided. 'Informal' or 'unofficial' exclusions, such as sending pupils home 'to cool off' for part of the day are unlawful, regardless of whether they occur with the agreement of parents or carers. <input type="checkbox"/> We will be mindful that it is unlawful to punish a child for the actions of their parents and will consider this when applying sanctions. <p>Attendance</p> <ul style="list-style-type: none"> <input type="checkbox"/> School attendance is mandatory for all pupils of compulsory school age and it is priority to ensure that as many children as possible regularly attend school. <input type="checkbox"/> Where a child is required to self-isolate or quarantine because of Covid-19 in accordance with relevant legislation or guidance published by UKHSA or the DHSC they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of Covid-19 they will be recorded as code I (illness). <input type="checkbox"/> For pupils abroad who are facing challenges, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply. <input type="checkbox"/> We will continue to clearly and consistently communicate the expectations around school attendance to families and any other professionals who work with the family. Any discussions will have a collaborative approach, focusing on the welfare of the child or young person and responding to the concerns of the parent, carer or young person. This 		<p>Refer to school attendance guidance</p>		
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conversation is particularly important for children with a social worker.

Term time holidays

- ☐ As restrictions begin to lift, some families may be looking to take holidays. As usual, parents should plan their holidays around school breaks and not take their children out of school on holiday during term time.
- ☐ Where a parent wishes to take their child out of school for whatever reason, the onus is on them to apply for a leave of absence and demonstrate why they believe the circumstances are exceptional. Schools make decisions on granting leave of absence but will not normally do so for a holiday.

Travel & quarantine

- ☐ Where pupils travel from abroad to attend a boarding school, we will explain the rules to pupils and their parents before they travel to the UK. All pupils travelling to England must adhere to [travel legislation](#), details of which are set out in [government travel advice](#).
- ☐ On 04/10/21, the red, amber and green list rules for entering England changed to remove the amber and green lists and allow those who are fully vaccinated, and under-18s from the UK or resident in approved countries, to travel with reduced requirements on testing and without the need to quarantine. The UK recognises the following Covid-19 vaccines: Pfizer BioNTech, Oxford AstraZeneca, Moderna and Janssen (J&J).
- ☐ Those aged 11 to 17 [need proof of a negative COVID-19 test](#) to travel to England (children aged 10 and under are exempt from this) and those aged 5 to 17 must take a Covid-19 travel test on or before day 2 (refer to: [Quarantine and testing if you've been in an amber list country](#)).
- ☐ From Monday, 4 October 2021, the rules for international travel to England will change. We will check the [rules for travel to England](#) for more information.
- ☐ Additional guidance has been issued on the [quarantine arrangements for boarding school pupils travelling from red-list countries to attend a boarding school in England](#).

Parents travelling abroad should bear in mind the impact on their child's education which may result from any requirement to quarantine or self-isolate upon return.

[Covid-19 Boarding Schools Operational Risk Assessment, Boarding school students from red list countries quarantine arrangements and Unaccompanied minors arriving from a red list country to attend boarding school](#)

Note: Government international travel advice will change from 04/10/21 – updated guidance to follow

Inadequate arrangements in place for managing off-site visits

Following the Downing Street Press Conference on 27/11/21, in response to the Omicron Covid variant, as a temporary, precautionary measure, **anyone** entering the UK will be required to take a **PCR** test on day 2 of their arrival in the UK and self-isolate until they receive a negative test result, regardless of their vaccination status. *These new measures will be reviewed after 3 weeks.*

- ☐ We will continue to undertake full and thorough risk assessments in relation to **all** educational visits, and in particular we will consider whether to go ahead with planned international educational visits at this time, recognising the risk of disruption to education resulting from the need to isolate and test on arrival back into the UK, and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment.
- ☐ Given the likely gap in Covid-19 cancellation insurance, if we are considering booking a new visit, whether domestic or international, we will ensure that any new bookings have adequate financial protection in place.
- ☐ From this term, we can go on international visits that have previously been deferred or postponed and organise new international visits for the future. We will refer to the [guidance on international travel and Foreign, Commonwealth and Development Office travel advice](#) before booking and travelling.
- ☐
- ☐ We will be aware that the [travel list](#) (and broader international travel policy) is subject to change and green list countries may be moved into amber or red. The travel lists may change during a visit and we must comply with international travel legislation and will have contingency plans in place to account for these changes.
- ☐ We will speak to either our visit provider, commercial insurance provider, or the Risk Protection Arrangement (RPA) to assess the protection available. If unsure contact organisations such as the [British Insurance Brokers' Association \(BIBA\)](#) or [Association of British Insurers \(ABI\)](#) for independent advice on insurance cover and options. Any school holding ATOL or ABTA refund credit notes may use these credit notes to rebook educational international visits.

Omicron Covid Variant

- ☐ Following the Downing Street Press Conference on 27/11/21, in response to the Omicron Covid variant, as a temporary, precautionary measure, **anyone** entering the UK will be required to take a **PCR** test on day 2 of

High
4x4 = 16

Refer to the [health and safety guidance on educational visits](#) and specialist advice from the [Outdoor Education Advisory Panel \(OEAP\)](#)

<p>Inadequate staffing ratios, staff availability and recruitment</p>	<p>their arrival in the UK and self-isolate until they receive a negative test result, regardless of their vaccination status. <i>These new measures will be reviewed after 3 weeks.</i></p> <p>Ratios and Qualifications</p> <ul style="list-style-type: none"> <input type="checkbox"/> We will undertake an appropriate audit to ensure staffing levels are appropriate. <input type="checkbox"/> We have contingency plans in place should staff be absent as a result of Covid-19. Our possible approaches to managing a shortfall in staffing include: <input type="checkbox"/> We will ensure that appropriate support is made available for pupils with SEND, e.g. by deploying teaching assistants and enabling specialist staff from both within and outside the school to work with pupils in different classes or year groups. <input type="checkbox"/> Where support staff capacity is available, we will consider using this to support catch-up provision or targeted interventions. TAs may also be deployed to lead groups or cover lessons, under the direction and supervision of a qualified, or nominated, teacher. Any redeployments will not be at the expense of supporting pupils with SEND. The Head teacher will be satisfied that the person has the appropriate skills, expertise and experience to carry out the work, and discuss and agree any proposed changes in role or responsibility with the member of staff. This includes ensuring that safe ratios are met, and/or specific training undertaken, for any interventions or care for pupils with complex needs where specific training or specific ratios are required. <input type="checkbox"/> We can continue to engage supply teachers and other supply staff including to deliver face to face education to pupils in school and remote education. <input type="checkbox"/> Where it is necessary to use supply staff, peripatetic teachers and volunteers, they will be expected to comply with our arrangements for managing and minimising risk and will be included in our communications, policies and processes for asymptomatic testing including provision of test kits where feasible. 	<p>High 4x4 = 16</p>	<p>Where it is not possible to have a DSL or Deputy physically in school, arrangements may be made for the DSL to be contactable via phone or video link if working from home. Alternatively, arrangements may be made with another school to use the expertise of their DSL. Where a trained DSL (or deputy) is not on site, in addition to one of the above options, a senior leader should take responsibility for co-ordinating safeguarding on site.</p> <p>The latest guidance on travel/quarantine can be accessed at: Travel abroad from England during coronavirus (COVID-19), Quarantine and testing if you've been in an amber list country, Coronavirus (COVID-19) testing before you travel to England, Booking and staying in a quarantine hotel when you arrive in England,</p>		
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- ☐ We will ensure we have adequate and appropriate equipment and facilities to give first aid to any employee or pupil who is injured or becomes ill at work; the level of first aid cover provided remains appropriate for our work environment and the level of first aid provision necessary in high risk settings is fully maintained. We will ensure sufficient Paediatric First Aid Trained staff are available when EYFS children are present on site or on school trips.
- ☐ Key telephone numbers of all available DSL's/deputies to be displayed in school.
- ☐ Ensure the contact details of the [Safeguarding Hub/Early Help Team/LADO](#) are available to all staff on duty.
- ☐ Ensure sufficient competent staff on duty to administer or supervise the administration of medication. Wherever possible, children to self-administer, witnessed by staff.

Staff taking leave

- ☐ Staff will need to be available to work in school during term time. We will discuss leave arrangements with staff to inform workforce planning taking into account their individual contractual arrangements.
- ☐ There is a risk that where staff travel abroad, their return travel arrangements could be disrupted due to Covid-19 restrictions, and they may need to quarantine on their return.
- ☐ Where it is not possible to avoid a member of staff having to quarantine during term time, we will consider if it is possible to temporarily amend working arrangements to enable them to work from home.
- ☐ Whilst it remains a decision for individual schools, we will make all staff aware that the LA view is that if staff must travel abroad which then mean they have to quarantine on their return (and this is not within school holiday periods), then this should be treated as unpaid leave.

Recruitment

Recruitment will continue as usual. We will continue to adhere to [Keeping children safe in education](#) regarding pre-appointment checks.

[Red, amber and green list rules for entering England.](#) *Note: On 04/10/21, the red, amber & green list rules for entering England changed to remove the amber & green lists & allow those who are fully vaccinated to travel with reduced requirements on testing and without the need to quarantine.*



<p>Visiting children in their own homes and contact with Covid-19 virus</p>	<p><u>Should we have a situation where a child requires a home visit such as in relation to safeguarding concerns or delivery of the EHC Plan to pupils not attending school, we will consider and adhere to guidance issued in Use of PPE in education, childcare and children's social care settings including AGPs.</u></p>	<p>High 4x4 = 16</p>	<p>Refer to KAHSC model Covid-19 Home Visits Risk Assessment</p> <p>Refer to Maintaining records to support NHS Test & Trace Refer to KAHSC model Letting Arrangements</p>		
<p>Visitors & spread of Covid-19 virus</p>	<ul style="list-style-type: none"> <input type="checkbox"/> We will ensure that all visitors and key contractors are aware of the school's control measures and ways of working. <input type="checkbox"/> As was the case pre-pandemic, access to contractors/external maintenance personnel should be by appointment only and wherever possible, arranged after school, holidays or weekends. <input type="checkbox"/> We will: <input type="checkbox"/> continue to ask every visitor (over the age of 16) to 'check in' by scanning the NHS QR code poster via their NHS Covid-19 app OR providing their name and telephone number (this can be done in advance, e.g. via a pre-booking system) along with the date of entry; <input type="checkbox"/> keep a record of all staff working in school, their shift times and dates, and their contact details; <input type="checkbox"/> keep these records of visitors and staff for 21 days and provide this information to NHS Test and Trace, if requested. <p>Lettings</p> <p>We expect each organiser to have their own Covid-19 risk assessment in place which we are satisfied with. This should include as a minimum the key elements of infection control (not</p>	<p>High 4x4 = 16</p>	<p>Education Support Partnership provides a free helpline for school staff and targeted support for mental health and wellbeing and the Frontline: Wellbeing toolkit for educators brings together a range of resources and support for staff.</p>		



<p>Lack of wellbeing management for pupils and families</p>	<p>attending or going home if symptomatic or have had a positive test result for example; test and trace; hand/respiratory hygiene; enhanced ventilation and cleaning). Hirers must also comply with our system of controls which will be included within our 'Conditions of Hire'.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Some pupils may be experiencing a variety of emotions in response to the coronavirus (Covid-19) outbreak, such as anxiety, stress or low mood. This may particularly be the case for vulnerable children, including those with a social worker and young carers. It is important to contextualise these feelings as normal responses to an abnormal situation. <input type="checkbox"/> We will offer pastoral support to pupils who are self-isolating, shielding or who are vulnerable. <input type="checkbox"/> We will also provide more focused pastoral support for pupils' individual issues, drawing on external support where necessary and possible. <p>Where there is a concern a child is in need or suffering or likely to suffer from harm, we (generally led by the DSL or deputy) will follow our Child Protection Policy and Part 1 of Keeping children safe in education and consider any referral to statutory services (and the police) as appropriate.</p> <p>There is a new guidance document to support the management of Covid related sickness absence which can be found on the School Portal HR and Payroll. This clarifies the approach to supporting staff and managing sickness absences arising from Covid-19 including supporting those that are recognised as CEV, managing short term and long-term absence due to Covid-19 and Long Covid (Post-Covid Syndrome).</p>	<p>High 4x4 = 16</p>	<p>Refer to extra mental health support for pupils and teachers, NHS Every Mind Matters and DfE School workload reduction toolkit</p> <p>Education Support Partnership provides a free helpline for school staff and targeted support for mental health and wellbeing and the Frontline: Wellbeing toolkit for educators brings together a range of resources and support for staff.</p>		
<p>Inadequate communications</p>	<p>We will provide clear, consistent and regular communication to improve understanding and consistency of ways of working</p>	<p>High 4x4 = 16</p>			

<p>with and training of staff</p>	<p>amongst staff and explain and agree any changes in working arrangements, including those working from home.</p> <ul style="list-style-type: none"> <input type="checkbox"/> We will ensure all staff are kept up to date with how safety measures are being implemented or updated. <input type="checkbox"/> We will ensure ongoing engagement with staff, (including through trades unions or employee representative groups) to monitor and understand any unforeseen impacts of changes to working environments. <p>We will promote awareness and focus on the importance of mental health at times of uncertainty (see above).</p>				
<p>Lack of wellbeing management for staff</p>	<ul style="list-style-type: none"> <input type="checkbox"/> We will be conscious of the wellbeing of all staff, including senior leaders themselves, and the need to implement flexible working practices in a way that promotes good work-life balance and supports teachers and leaders. <input type="checkbox"/> We will monitor the wellbeing of people who are working from home or self-isolating and help them stay connected to the rest of the workforce, especially if the majority of their colleagues are on-site. We will keep in touch with off-site workers on their working arrangements including their welfare, mental and physical health and personal security. <p>Where work-related issues present themselves, the HSE's published Stress Management Standards will be followed. We will also review how we can support employees on broader issues, such as bereavement support and general anxiety about the ongoing situation (e.g. by signing up for a formal Employee Assistance Programme providing confidential telephone advice and counselling).</p>				
<p>Fire emergencies</p>	<ul style="list-style-type: none"> <input type="checkbox"/> We will regularly review and where necessary, update the existing school Fire Risk Assessment and Fire Safety Management Policy/Evacuation Plan. <input type="checkbox"/> We will ensure there are sufficient trained staff on duty e.g. sufficient fire wardens to cover the site to enable sweeps of all areas to be carried out and to ensure full 	<p>High 4x4 = 16</p>	<p>Refer to advice on Fire safety in new and existing school buildings</p>		

	<p>evacuation of the building – particularly important if staff are required to self-isolate.</p> <ul style="list-style-type: none"> <input type="checkbox"/> We will assess the suitability of Personal Emergency Evacuation Plans (PEEPs) – especially if previous role holders are no longer available to continue e.g., they may be required to self-isolate. <input type="checkbox"/> The use of portable heaters will be avoided where possible. However, where it is necessary to use these, we will ensure suitable controls are implemented and include within the existing Fire Risk Assessment. <input type="checkbox"/> Generally, fire doors should remain closed at all times when not in use OR we will consider installing automatic door release devices connected to the fire alarm system to fire doors. However, it is accepted that increasing ventilation during the Covid-19 pandemic is a key mitigation. Whilst it is accepted that this practice will improve ventilation by increasing the air flow through the room (assuming windows are also left open), this must be balanced against the need to reduce the risk of fire spread. In line with November 2021 Cumbria County Council Guidance 'Improving ventilation during COVID-19', the recommendation is for classroom doors (and the doors of any other rooms) to remain open when the room is occupied. The windows of the room should also be opened, if practicable, to create a crossflow of air. However, fire doors of all unoccupied rooms should remain closed. Refer also to 'Ventilation' on Pages 10-11. <input type="checkbox"/> Propping open doors by any other means other than proprietary hold open devices triggered by the fire alarm is not permitted. <input type="checkbox"/> We will consider the closing of windows should the fire alarm activate. Because of the need for increased ventilation in the school during the Covid-19 pandemic, there may not be time to close all windows prior to evacuation. This situation is only permissible where to close all the windows would result in increased risk to staff and pupils. <p>Alcohol based hand sanitiser – fire risks</p> <ul style="list-style-type: none"> <input type="checkbox"/> All hand sanitiser stations will be kept clear of potential sources of heat and ignition (such as electrical or heating equipment). <input type="checkbox"/> Any spillages will be cleaned up immediately and the items used to clear the spillage disposed of carefully (they will be highly flammable until the alcohol has evaporated). 				
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<p>Lack of building/ property maintenance</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Alcohol-based hand sanitiser will be stored away from sources of heat and ignition, ideally in a metal cabinet. A sign will be provided on the cabinet/store warning of the presence of flammable liquids. <input type="checkbox"/> The location of the cabinet(s)/store(s) and the quantity held will be recorded on a plan of the school to make fire fighters aware of this hazard should they attend an incident at the school (and also included in our existing Emergency Plan). <p>Alcohol-based hand gels will not be used in science labs or D&T & Food workshops/lessons. We will not make our own gels. Instead of gels, we will use skin-friendly cleaning wipes that claim to kill 99.99% of bacteria and viruses and are non-alcohol based.</p> <p>All routine external and in-house monitoring, testing and inspection will continue as normal including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Routine in-house health & safety inspections; <input type="checkbox"/> External and in-house maintenance of fire safety equipment and systems; <input type="checkbox"/> Ongoing external and in-house hot and cold water safety (legionella) monitoring, maintenance and testing; <input type="checkbox"/> In-house monitoring of asbestos containing materials; <p>External and in-house monitoring, testing and maintenance of all other systems and equipment in line with statutory requirements and manufacturer's instructions.</p>	<p>High 4x4 = 16</p>	<p>Refer to CIBSE: emerging from lockdown and HSE: Legionella Risks during the Coronavirus Outbreak</p>		
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[illegible]



Assessment Conclusion

Providing the stated control measures are implemented and adhered to, the risk of contracting most viral infections can reduce to a manageable level in normal circumstances. Compliance with this risk assessment should be monitored and reviewed to ensure control measures remain effective.

To be completed by the Individual undertaking the risk assessment:

Name: Mark Walsh

Job Title: Health and Safety Coordinator

Signature: M. Walsh

Date: 29.11.2021

To be completed by the Head teacher:

I consider this risk assessment to be suitable and sufficient to control the risks to the health and safety of both employees undertaking the tasks involved and any other person who may be affected by the activities.

Name: Mr David William Tromans

Job Title: Head Teacher



Signature:

Date: 29.11.2021

Links to Guidance

Staff, Pupils and Others

Those who are clinically vulnerable, or are living with someone who is, should follow [protective measures guidance](#).

[Implementing protective measures in education and childcare settings](#)

[Conducting a SEND risk assessment during the Coronavirus outbreak](#)

[Guidance on hand cleaning](#)

[Kids life skills – self-care- going to the toilet](#)

[Education, health and care needs assessments and plans: guidance on temporary legislative changes relating to coronavirus \(COVID-19\)](#)

Personal Protective Equipment - PPE

[PHE guidance to putting on and removing \(Donning and Doffing\) PPE](#)

Travel

[Safer travel guidance for passengers](#)

Netherhall School - COVID-19 SCHOOLS OPERATIONS RISK ASSESSMENT



	Severity/ Outcome					
		1 Insignificant	2 Minor	3 Moderate	4 Major	5 Most Severe
Likelihood	5 Very Likely	5 Low Risk	10 Medium Risk	15 High Risk	20 High Risk	25 High Risk
	4 Likely	4 Low Risk	8 Medium Risk	12 Medium Risk	16 High Risk	20 High Risk
	3 Possible	3 Low Risk	6 Medium Risk	9 Medium Risk	12 Medium Risk	15 High Risk
	2 Unlikely	2 Low Risk	4 Low Risk	6 Medium Risk	8 Medium Risk	10 Medium Risk
	1 Very Unlikely	1 Low Risk	2 Low Risk	3 Low Risk	4 Low Risk	5 Low Risk