

Catalyst Academies Trust	RISK ASSESSMENT FORM - September 2020					Completed in accordance with Gov Guidance for Full Opening – Schools 2/7/2020	
Location/Site: Catalyst Schools		Date of Assessment: 13 th May 2020 Updated 26 th June 2020 Updated 3 rd July 2020 Updated 7 th July 2020 Updated 8 th July 2020 Updated 9 th September 2020 Updated 22 nd September 2020		Assessor(s): Trust SLT	Reference: QUARRY HILL ACADEMY		
Activity/Task/Situation	What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom	Action by when	Completed
<p>Lack of social distancing in the classroom</p> <p>See Behaviour Policy Appendix</p>	Resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol style="list-style-type: none"> 1. Where possible keep classes to 30 2. Support pupils to maintain distance and limit physical contact with staff and their peers where possible. 3. Where possible remove excess furniture to increase space 4. Children keep to their regular desks when in the room appropriate the year group 5. Social distancing rules created for and with the children – (Include instructions how to line up, use of toilet, moving around the classroom etc) 6. Rule re-visited and modelled many times a day and linked to school behaviour system – lots of praise for adherence and sanctions for non-compliance 7. Children isolated if cannot adhere to rules and spoken to re the need for social distancing (PLC) 8. Feedback – using large whiteboard and visualizer and interactive whiteboard limiting close interaction 9. Work and resources are distributed at the start of the lesson or from a central collection point where possible 10. Adults should ideally maintain 2 metre distance from other adults and children where possible 				

			<ol style="list-style-type: none"> 11. Teachers/ LSAs are assigned to these children and stay with these children throughout the day (<i>and on sub-sequent days</i>) and a register is to be kept of the adults who have contact with the bubble 12. Children stay in the classroom/designated outdoor space for majority of the session and do not mix with other bubbles 				
<p>Lack of social distancing using toilets and poor hygiene</p> <p>See H&S Appendix</p>	Resulting in direct and indirect transmission of the virus		<ol style="list-style-type: none"> 1. One child allowed to go to the toilet at a time 2. Children reminded of good hand hygiene regularly and soap is available at all sinks. 3. Extra Signs in toilet re washing hands 4. Wedges for the toilet external toilet doors if not fire doors. 5. Only disposable towels to be used and disposed of in lidded bins 6. Enhanced cleaning of toilets in place (x 3 times per day) 	Extra soap/sanitiser ordered to ensure supply Make extra signs for the toilets/doors			
<p>Lack of social distancing waiting to enter classroom in morning</p>	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Children to wait to enter the classroom – to stand 2 metres apart whilst handwashing occurs 2. Allocated gate for children to arrive and leave from – one way system implemented to ensure limited crossover 3. Instructions shared re social distancing between families in the morning with parents and children 4. Signage for parents and children displayed outside the classroom and on floor markings 5. SLT to be on duty to supervise and remind parents of expectations where necessary 6. Staggered drop off and pick up times for different year groups/provisions 7. All staff on doors or outside to wear face masks 	<p>Markings on floor – initial pathway to indicate one way</p> <p>Markings on floor by each classroom door to indicate safe distance for parents to stand</p> <p>Signs on classrooms – reinforcing expectations of parents/carers to wear face masks when dropping off</p>			
<p>Lack of social distancing during playtimes and lunchtimes</p>	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Staggered lunchtime to ensure no mixing of bubbles 2. Children who bring packed lunch in, keep them on the trolley and children only to pick up their lunchbox (Staff not to touch) 3. Designated playground areas 				

See Lunchtime RA			4. Adults from bubbles to supervise their own bubble				
Lack of social distancing in the corridors	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Children staying in their classroom and accessing outside from classroom door 2. One child going to toilet at one time 3. Messages to office via phones/ email 4. Share instructions with children concerning going and returning to toilet 5. When moving class around the school – 2 metres between children – one adult at back insisting the distance is maintained – regular practice of this in the first few days 				
Contact of shared resources	Resulting in indirect transmission of the virus		<ol style="list-style-type: none"> 1. Resources not to be shared outside of bubbles. 2. Tables, door handles and other surfaces cleaned with appropriate cleaning product regularly 3. Resources on tables ready for lesson where possible 4. Children encouraged to wash hands / use hand sanitiser before lessons and after each lesson. 5. Keyboards and screens sprayed and wiped down with cleaning solution after each bubble uses the ICT suite 				
Emotional distress of the children			<ol style="list-style-type: none"> 1. Children to return to school in their previous class groups. 2. Children and parents informed of their new class teacher before the summer break. Contact either virtually or by telephone to alleviate any concerns. 3. PSHE curriculum that supports emotional well-being, worries and fears 4. The structure of the day and routines explained clearly by staff to reduce anxiety 5. Support from Thurrock EMHWS outreach practitioners. 				
Emotional distress of the			1. Sharing of risk assessment - hazard identification and control measures				

<p>staff – including anxiety and workload</p>			<ol style="list-style-type: none"> 2. Support from SLT/ Well-being team if needed 3. Staff meetings to discuss concerns and evaluate well being 4. Sharing of support helplines 5. Risk assessments reviewed after day one, week one and fortnightly after that – this is flexible 6. Designated “staff areas” areas 7. Where signs of distress are recognised – support plans put in place. 			
<p>Risk of spreading virus due to close contact with children – 1:1 and restraint</p> <p>See EYFS RA See PE RA See PLC RA (if applicable)</p>	<p>Resulting in direct transmission of the virus</p>		<ol style="list-style-type: none"> 1. Read <i>(Coronavirus (Covid 19) Implementing protective measures in early years and education settings.</i> 2. Masks purchased if needed and instructions form PHE re cleaning (Disposable Civilian Protective Type 1 face masks 3 ply) 3. Extra disposable aprons ordered 4. Extra gloves ordered 5. Some visors also ordered if needed 6. Reduced timetable / exclusion / inclusion considered if necessary if children are acting in a way staff are put at risk <p>System of Controls</p> <p>Prevention:</p> <ol style="list-style-type: none"> 1. Minimise contact with individuals who are unwell by ensuring that those who have coronavirus symptoms or who have someone in their household who does, do not attend school. 2. Clean hands thoroughly more often than usual. 3. Ensure good respiratory hygiene by promoting the ‘catch it, bin it, kill it’ approach. 4. Introduce enhanced cleaning, including frequently touched surfaces often, using standard products such as detergents and bleach. 	<p>Individual risk assessments to be carried out for children with specific 1:1 needs</p>		

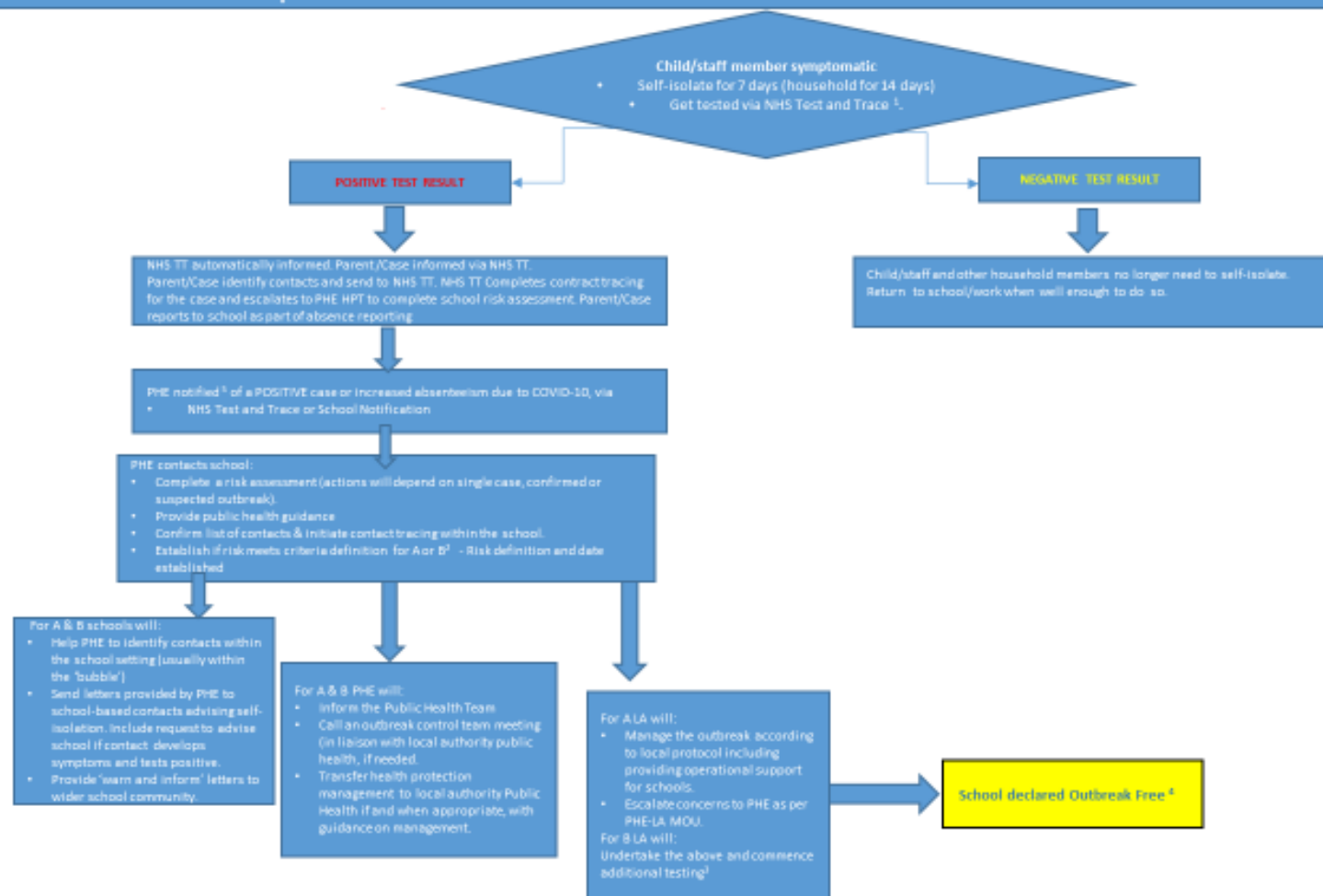
			<ol style="list-style-type: none"> 5. Minimise contact between individuals and maintain social distancing wherever possible. 6. Where necessary, wear appropriate personal protective equipment (PPE) <p>Numbers 1 to 4 must be in place in all schools all the time.</p> <p>Number 5 must be properly considered and schools must put in place measures that suit their particular circumstances.</p>				
<p>Staff movement around the school</p> <p>See Office RA See Staffroom RA</p>	Resulting in indirect transmission of the virus		<ol style="list-style-type: none"> 1. Offices to remain closed 2. Only office staff to enter the office 3. Maintain 2m distance in staff room. 4. Appropriate cleaning materials and wipes to be available in all shared areas. 5. Where possible, surfaces which need to be touched should be limited – lids removed from tea/coffee containers for example 6. Stay in zoned teaching area in class 7. Shared spaces (photocopier rooms, stock cupboards) to have space specific risk assessments shared with staff. 8. Staff must wash their hands before entering a shared area and when leaving 	Appropriate signage to be made and erected			
<p>Children/ Staff falling ill and showing symptoms in School</p> <p>See Flow Diagram Health England Current Guidance</p>	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Members of the senior leadership team and CEO of Catalyst Academies Trust will continually check for further updates and amend the risk assessment accordingly and in line with new guidance. 2. If any child displays symptoms, parents will be immediately contacted to take their child home. Any child waiting to be collected will be in a room with windows and doors that are opened. Staff members showing symptoms will be sent home immediately. 3. If child who is displaying symptoms uses the toilets, these will be thoroughly cleaned with disinfectant before anyone else uses the area. 4. The person who supervised the child, will do the cleaning to avoid unnecessary exposure, wearing PPE as required or necessary. 				

			<p>5.A staff member will remain behind a closed door if this is at all possible. Where this is not possible, staff will wear PPE required and will stay as far away as possible.</p> <p>6.If a child or staff member displays symptoms they must isolate for 7 days and their household for 14days. Child or staff member to be tested via NHS test and trace and follow procedures as outlined in the document below.</p> <p>7. If a child who displays symptoms has a sibling in another school, they will also be informed.</p> <p>8.If a child or staff member receives a positive test result, then Public Health England and Local Authority will be informed and parents and staff members who have come into contact with the person with a positive test outcome will be informed and asked that all children self-isolate for 14 days. Contact tracing to be initiated within school at this point.</p> <p>9.Testing of staff who have had contact with that group will be a priority.</p> <p>10.Deep cleaning of the area where the child or staff member was working will be carried out. Any child waiting to be collected will be in a room with windows and doors that are opened.</p> <p>See PHE flowchart below to follow recommended guidance for any child displaying symptoms.</p> <p>11.Test and Trace procedure is followed.</p> <p>12.Staff and parents/ carers need to book a test if they display symptoms.</p> <p>System of Controls Response to any infection:</p> <ol style="list-style-type: none">1. Engage with NHS Test and Trace process.2. Manage confirmed cases of coronavirus amongst the school community.				
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<p>All stakeholders identified as being at increased risk and exposed to COVID-19</p>	<p>All stakeholders identified as at increased risk and exposed to COVID-19.</p>	<p>Employees, pupils, contractors and visitors including those in specific vulnerable groups such as BME, may be exposed to COVID-19.</p>	<p>1.Children and young people (0 – 18 years of age) who have been classed as clinically extremely vulnerable due to pre-existing medical conditions are advised to shield.</p> <p>2.Clinically extremely vulnerable children are not expected to be attending school and should continue to be supported at home as much as possible.</p> <p>3.If a child is deemed clinically vulnerable (but not clinically extremely vulnerable), parents MUST follow medical advice provided for their child.</p> <p>4.Identify pupils who are clinically extremely vulnerable and clinically vulnerable.</p> <p>5.SLT to communicate appropriately with their most vulnerable children and health care plans updated where necessary.</p> <p>6.Additional arrangements implemented to support medical needs of pupils who will be attending schools and documented within health care plans.</p> <p>7.Health care plans and arrangements for supporting medical needs of pupils to be communicated to relevant persons only.</p> <p>8.Updated health care plans to be signed by parent / carer.</p> <p>9.Individual risk assessments to be completed for those in specific vulnerable groups if deemed necessary.</p>	<p>Government guidance for young people on shielding and protecting people most likely to become unwell if they catch coronavirus is available via: https://www.gov.uk/government/publications/guidanceon-shielding-and-protecting-extremely-vulnerablepersons-from-covid-19/covid-19-guidance-onprotecting-people-most-likely-to-get-unwell-fromcoronavirus-shielding-young-peoples-version</p> <p>NHS guidelines outline the criteria for those at higher risk of COVID-19, this can be accessed via: https://www.nhs.uk/conditions/coronavirus-covid19/people-at-higher-risk-from-coronavirus/whos-athigher-risk-from-coronavirus/</p> <p>If the need for PPE/RPE is required, then staff must be trained in the safe putting on and removal of items.</p> <p>Government guidance issued for COVID-19 Personal Protective Equipment is available at: https://www.gov.uk/government/collections/coronaviruscovid-19-personal-protective-equipment-ppe</p> <p>HSE guidance related to COVID-19 and face-fit testing is available at:</p>			

			10. Assess the need for PPE / RPE to facilitate any close contact personal care, or procedures that create airborne risk (e.g. suctioning and physiotherapy).	https://www.hse.gov.uk/news/fac-e-mask-ppe-rpecoronavirus.htm			
Visitors to school.	Virus transmission from a visitor coming into the school.	Employees, pupils, and visitors.	<ol style="list-style-type: none"> 1. Visitors (e.g. Contractors, Supply Staff), will be not be allowed on site unless there is a prior appointment unless there are exceptional circumstances. 2. All visitors handed protocol of expectations to adhere to 3. All visitors (e.g. Speech and Language Therapist) will work in one space wherever possible that is thoroughly cleaned before and after use. 4. Where visitors visit frequently they may be given their own lanyard. All lanyards are cleaned in between use 5. Where electronic signing in is used, this station will be cleaned frequently. Where paper signing in is used, visitors will use their own pen. 6. Other professionals should supply the school with their organisations' risk assessment. 7. When visitors call to make an appointment, the office staff will inform them of the procedures, take their contact details (for track and trace) and expectations for their visit. 8. Any visitor not adhering to the expectations will be asked to leave. 	Visitors need to be asked to provide their own risk assessment.			

Test and Trace process for schools



1= order a test through <https://www.nhs.uk/conditions/coronavirus-covid-19/> or call 119

2= **Definition A** is a case requiring further investigation. Criteria: 1 confirmed case and 1 symptomatic case within the school or 2 suspected cases in a bubble or 1 confirmed and 1 suspected case within a bubble.

Definition B is a Confirmed Outbreak Criteria: 2 confirmed cases of COVID-19 within the same bubble within the school or 2 or more confirmed cases anywhere in the school

3= Additional testing will be performed as appropriate within the school every 7 days on asymptomatic staff and students until there are no new cases and outbreak is declared over.

4= The outbreak can be declared over once no new cases (asymptomatic or symptomatic) have occurred in the 28 days since the appearance of symptoms / from the date of swabbing in the most recent case

5= To notify a case(s), please call the Public Health England (PHE) in the East of England on 0300 303 8537 (option 1)