

Catalyst Academies Trust		RISK ASSESSMENT FORM						
Location/Site: Catalyst Schools			Date of Assessment: 13 th May 2020 Updated 26 th June 2020 Updated 3 rd July 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	
Lack of social distancing in the classroom	Resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol style="list-style-type: none"> 1. Reduce the number of children in the classroom to enable social distancing (no more than 15) 2. Remove excess furniture to increase space if space to do so 3. Children keep to their desks when in the room 4. Social distancing rules created for and with the children – (Include instructions how to line up, use of toilet, moving around the classroom etc) 5. 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 6. Children isolated if cannot adhere to rules and spoken to re the need for social distancing (PLC) 7. Lessons planned for individual work (not pairings or group work) 8. Feedback – using large whiteboard and visualizer and interactive whiteboard not close interaction 9. Work and resources are distributed at the start of the lesson or from a central collection point, not given out by staff or children. 10. Mark out an area for the teacher – 2m distancing at front of room 11. Mark out pathways to move through the room if practicable 12. Children to use same desk if returning next day 					

			<p>13. Teachers/ LSAs are assigned to these children and stay with these children throughout the day (<i>and on sub-sequent days</i>)</p> <p>14. Children stay in the classroom/designated outdoor space for majority of the session and do not mix with other groups</p>				
Lack of social distancing using toilets and poor hygiene	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. Allocated toilets for different groups of children 3. Children reminded of good hand hygiene regularly and soap is available at all sinks. 4. Extra Signs in toilet re washing hands 5. Wedges for the toilet external toilet doors if not fire doors. 	<p>Extra soap/sanitiser ordered to ensure supply</p> <p>Make extra signs for the toilets/ doors</p> <p>Barriers placed in corridors to avoid children going to other provision</p>			
Lack of social distancing waiting to enter classroom in morning	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Markers outside the classrooms for the children and parents to wait – more than 2 metres apart as more than one person 2. Allocated gate for children to arrive and leave from 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 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 				
Lack of social distancing during playtimes and lunchtimes	Resulting in direct transmission of the virus		<ol style="list-style-type: none"> 1. Key worker children eat in their classrooms at the same desk or space used during lessons 2. Key worker children asked to bring packed lunch in, packed lunches kept on the trolley and children only to pick up their lunchbox (Staff not to touch) 3. Year groups half days do not stay for lunch/ will eat in class as increase to full days 				

<p>Lack of social distancing in the corridors</p>	<p>Resulting in direct transmission of the virus</p>		<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 	<p>Barriers placed to separate corridors and different provisions</p>			
<p>Contact of shared resources</p>	<p>Resulting in indirect transmission of the virus</p>		<ol style="list-style-type: none"> 1. Children to have packs of stationary (labelled with their name on) 2. Children have a zip wallet on the desk that contains any work and resources that may be needed for the day 3. Resources washed in Milton each night and left to dry if not same person using them the next day 4. Tables, door handles and other surfaces cleaned with appropriate cleaning product between sessions 5. Lessons planned so resources are individual and not shared – or on white board 6. Resources on tables ready for lesson and not distributed within the lesson 7. Plastic packets (zippy) bags used for individual resources 8. Children encouraged to wash hands / use hand gel before lessons and after each lesson 9. Staff will not handle sheets or other resources children have touched unless absolutely necessary. They will wash their hands thoroughly after touching any items 	<p>Packs of labelled stationary</p>			
<p>Emotional distress of the children</p>			<ol style="list-style-type: none"> 1. Children to have class teacher and/ or LSA (if possible under vulnerable staff guidance) in the first instance 2. Small numbers of children to support their emotional need 3. Reduced time in school to ensure transition is successful from home to school 4. Daily PSHE curriculum that supports emotional well-being, worries and fears 				

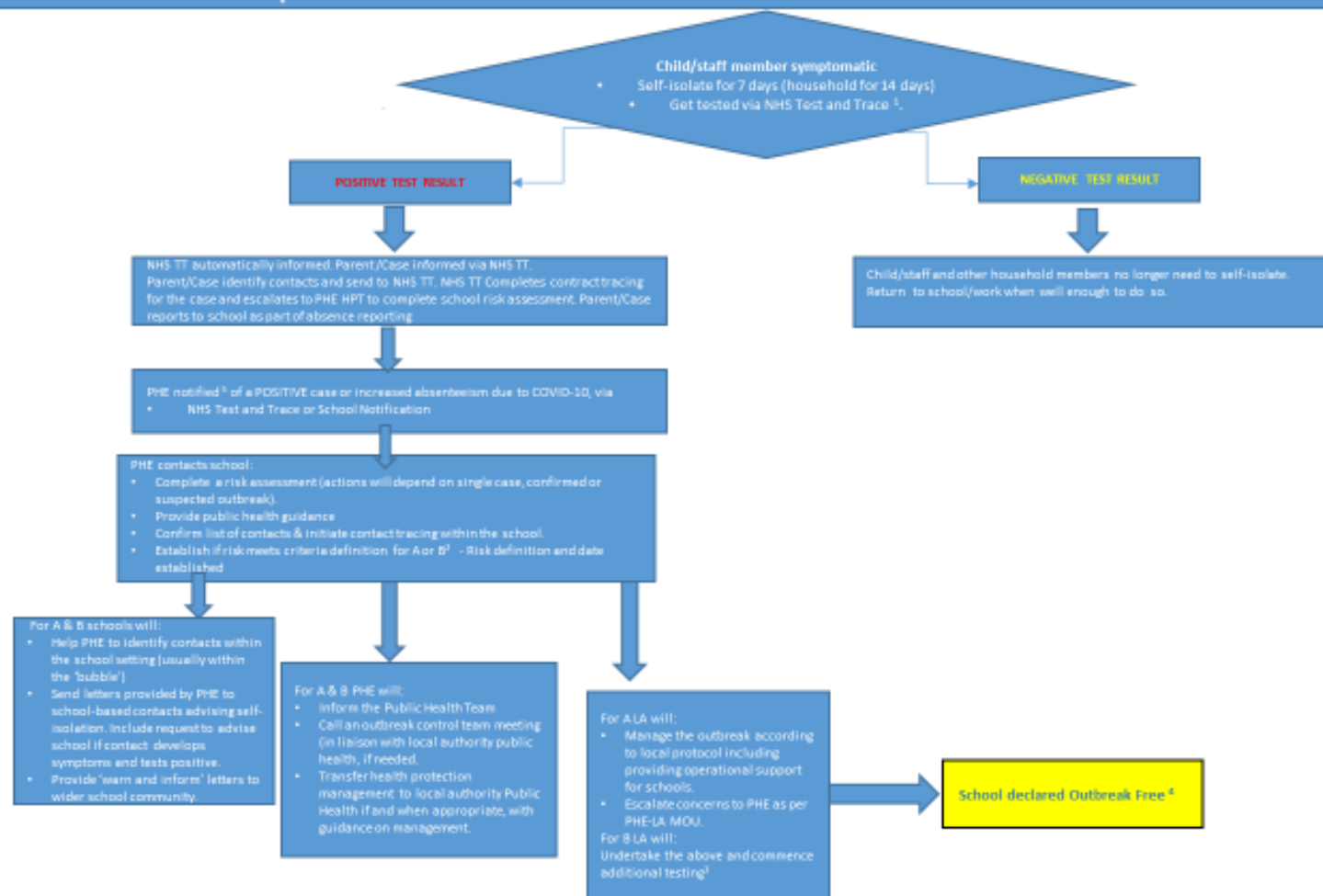
			5. The structure of the day and routines explained clearly by staff to reduce anxiety				
Emotional distress of the staff – including anxiety and workload			<ol style="list-style-type: none"> 1. Sharing of risk assessment - hazard identification and control measures 2. Support from SLT/ Well-being team if needed 3. Staff meeting – virtually – to discuss concerns and shared control measures 4. Sharing of support helplines 5. At least one SLT member of staff on site everyday for staff to share concerns with 6. Risk assessments reviewed after day one, week one and fortnightly after that – this is flexible 7. Designated “staff areas” areas for different groups of staff – maybe rota for same area if needed 8. Planned time for planning and preparation within the week esp for those with children in school 9. Teachers who are in daily to minimise online interaction with home learning (Purple Mash) 10. Extremely vulnerable staff (Shielding) work from home. Vulnerable staff – those suggests to strict social distancing – working at home or in school with strict 2 metre distancing measures in place 				
Risk of spreading virus due to close contact with children – 1:1 and restraint	Resulting in direct transmission of the virus		<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 – N95 grade and instructions form PHE re cleaning – so issued to individuals (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 	Individual risk assessments to be carried out for children with specific 1:1 needs			

			Pls note the Government guidance states "Wearing face coverings or face masks is not recommended"				
Staff movement around the school	Resulting in indirect transmission of the virus		<ol style="list-style-type: none"> 1. Offices to be 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 will be on site only when necessary and will be encouraged to go home promptly (to avoid additional contact with adults) 9. Staff must wash their hands before entering a shared area and when leaving 	Appropriate signage to be made and erected Space specific risk assessments of shared areas to be carried out by the individual schools.			
Children/ Staff falling ill and showing symptoms in School	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. In the case that this staff member is working as the sole teacher in a bubble, all children within the bubble will be sent home for the rest of that day. 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>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>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-</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>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).</p>	<p>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-at-higher-risk-from-coronavirus/ 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/coronavirus-covid-19-personal-protective-equipment-ppe</p> <p>HSE guidance related to COVID-19 and face-fit testing is available at: https://www.hse.gov.uk/news/face-mask-ppe-rpecoronavirus.htm</p>			
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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)