

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		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"> Where possible keep classes to 30 Support pupil to maintain distance and now touch staff and their peers where possible. Where possible remove excess furniture to increase space if space to do so Children keep to their regular desks when in the room appropriate the year group Social distancing rules created for and with the children – (Include instructions how to line up, use of toilet, moving around the classroom etc) 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 Children isolated if cannot adhere to rules and spoken to re the need for social distancing (PLC) Feedback – using large whiteboard and visualizer and interactive whiteboard not close interaction Work and resources are distributed at the start of the lesson or from a central collection point, not given out by staff or children. Mark out an area for the teacher – 2m distancing at front of room Adults should ideally maintain 2 metre distance from other adults and children Mark out pathways to move through the room if practicable 					

			<p>13. 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</p> <p>14. Children stay in the classroom/designated outdoor space for majority of the session and do not mix with other bubbles</p>				
<p>Lack of social distancing using toilets and poor hygiene</p> <p>See H&S Appendix</p>	<p>Resulting in direct and indirect transmission of the virus</p>		<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. 6. Only disposable towels to be used and disposed of in lidded bins 	<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>			
<p>Lack of social distancing waiting to enter classroom in morning</p>	<p>Resulting in direct transmission of the virus</p>		<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 				
<p>Lack of social distancing during playtimes and lunchtimes</p> <p>See Lunchtime RA</p>	<p>Resulting in direct transmission of the virus</p>		<ol style="list-style-type: none"> 1. Staggered lunchtime to ensure no mixing of bubbles 2. Provision may need to be made for packed lunches to be in classrooms 3. Children who bring packed lunch in, keep them on the trolley and children only to pick up their lunchbox (Staff not to touch) 4. Designated playground areas 5. 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 	Barriers placed to separate corridors and different provisions			
Contact of shared resources	Resulting in indirect transmission of the virus		<ol style="list-style-type: none"> 1. Children to have packs of stationary where possible where these are shared, they are to be washed in Milton/ other appropriate disinfectant each night and left to dry if not the same bubble using them the next day, this is essential to shared school resources. Otherwise these resources can be quarantined for 48 hours (72 for plastic) before use. 2. Tables, door handles and other surfaces cleaned with appropriate cleaning product between sessions 3. Lessons planned so resources are individual and not shared – or on white board 4. Resources on tables ready for lesson and not distributed within the lesson 5. Children encouraged to wash hands / use hand gel before lessons and after each lesson. 6. Keyboards and screens sprayed and wiped down with cleaning solution after each bubble uses the ICT suite 	Packs of labelled stationary			
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 				

			<p>well-being, worries and fears</p> <ol style="list-style-type: none"> 4. The structure of the day and routines explained clearly by staff to reduce anxiety 5. Support from Thurrock EMHWS outreach practitioners. 			
<p>Emotional distress of the staff – including anxiety and workload</p>			<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. 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 – 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 <p>Pls note the Government guidance states “Wearing face coverings or face masks is not recommended</p> <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 	<p>Individual risk assessments to be carried out for children with specific 1:1 needs</p>		

			<p>attend school.</p> <ol style="list-style-type: none"> 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. 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. 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>	<p>Resulting in indirect transmission of the virus</p>		<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 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 	<p>Appropriate signage to be made and erected</p> <p>Space specific risk assessments of shared areas to be carried out by the individual schools.</p>			
<p>Children/ Staff falling ill and showing symptoms in</p>	<p>Resulting in direct transmission of the virus</p>		<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 				

<p>School</p> <p>See Flow Diagram</p> <p>Health England</p> <p>Current Guidance</p>			<p>line with new guidance.</p> <p>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.</p> <p>3.If child who is displaying symptoms uses the toilets, these will be thoroughly cleaned with disinfectant before anyone else uses the area.</p> <p>4.The person who supervised the child, will do the cleaning to avoid unnecessary exposure, wearing PPE as required or necessary.</p> <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>			
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			<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</p> <p>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. 3. Contain any outbreak by following local health protection team advice. <p>These must be followed in every case where they are relevant.</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>	<ol style="list-style-type: none"> 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. 2. Clinically extremely vulnerable children are not expected to be attending school and should continue to be supported at home as much as possible. 3. If a child is deemed clinically vulnerable (but not clinically extremely vulnerable), parents MUST follow medical advice provided for their child. 4. Identify pupils who are clinically extremely vulnerable and clinically vulnerable. 5. SLT to communicate appropriately with their most vulnerable children and health care plans updated where necessary. 6. Additional arrangements implemented to support medical needs of pupils who will be attending schools and documented within 	<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/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/covid-19-guidance-on-protecting-people-most-likely-to-get-unwell-from-coronavirus-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>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>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-rpe-coronavirus.htm</p>			
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 not be allowed on site unless there is a prior appointment unless there are exceptional circumstances. 2. All visitors (e.g. Speech and Language Therapist) will work in one space wherever possible that is thoroughly cleaned before and after use. 3. Visitors will be given a sticker which must be worn. Where visitors visit frequently they may be given their own lanyard. 4. Where electronic signing in is used, this station will be cleaned frequently. Where paper signing in is used, visitors will use their own pen. 5. Other professionals should supply the school with their organisations' risk assessment. 6. 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. 	<p>Visitors need to be asked to provide their risk assessment.</p>			

7. Any visitor not adhering to the expectations will be asked to leave.

Test and Trace process for schools

