



Glensford Primary Academy
Schools operating safely - risk assessment
Update 4 January 2022

This risk assessment is updated in the light of feedback, experience and guidance. Trade unions and staff are invited to comment and this is being made public via the school's website. The school recognises that there remain considerable challenges from the covid-19 pandemic. The Department for Education's guidance is at

[Schools COVID-19 operational guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/schools-covid-19-operational-guidance)

Staff, parents, pupils, visitors and key contractors working at the school are made aware of the school's control measures and ways of working set out below.

This risk assessment has been updated in the light of the very high numbers of positive test results for covid-19, particularly the very high transmission levels of the omicron variant. At the start of the spring term:

- staff will wear face coverings in communal areas outside of the classroom, unless exempt for medical reason
- only essential visitors will visit the school
- any visitors to any school will wear a face covering while on-site, this includes adults collecting children in the playground
- large gatherings will not take place – senior leaders will consider carefully how best to hold whole staff training and meetings, and large parents' meetings

After school clubs/enrichment opportunities and wrap around care will not be banned but may be restricted when we are advised we should do so.

Control measures

There are four key areas where more detail is provided below:

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.

1. Ensure good hygiene for everyone

- Hand hygiene - Frequent and thorough hand cleaning should continue to be regular practice. We will continue to ensure that pupils clean their hands regularly. This can be done with soap and water or hand sanitiser. We are refreshing the importance of these measures at the start of the term.
- Respiratory hygiene - The 'catch it, bin it, kill it' approach continues to be very important (the e-Bug COVID-19 website contains free resources for you, including materials to encourage good hand and respiratory hygiene)
- Use of personal protective equipment (PPE) - Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the use of PPE in education, childcare and children's social care settings provides more information on the use of PPE for COVID-19.

2. Maintain appropriate cleaning regimes

Our cleaning schedule includes daily cleaning of all areas and equipment, with a particular focus on frequently touched surfaces, using the Public Health England guidance on the cleaning of non-healthcare settings. We are refreshing the importance of vigilance and rigour both by the cleaning but also the additional cleaning generally contributed by all members of the school community in their workspaces.

3. Keep occupied spaces well ventilated

When the school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained.

We have looked at any poorly ventilated spaces and taken steps to improve fresh air flow in these areas. We will give particular consideration when holding events where visitors such as parents are on site, for example, school plays.

Our ventilation is adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. Where systems cannot be adjusted to full fresh air, then systems will be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.

Where possible, opening external windows improves natural ventilation, and opening internal doors (and some external opening doors) also assists with creating a throughput of air.

We are using the CO₂ monitors that the Department for Education have provided to all schools so that staff can identify where ventilation needs to be improved. We are exploring the latest suggestion from the Department for air purifiers where these are available for use in poorly ventilated areas of the school.

4. Following public health advice on testing, self-isolation and managing confirmed cases of covid-19

The main symptoms of coronavirus (COVID-19) are:

- a high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- a loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Schools no longer carry out contact tracing with close contacts now being identified via NHS Test and Trace.

Children over the age of 5 (up to 18 years, 6 months) and fully vaccinated adults (who have had 2 doses of an approved vaccine) who are identified as a contact of someone with COVID-19 do not have to self-isolate and are strongly advised to take a lateral flow test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result. Pupils with SEND identified as close contacts should be supported by their school and their families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing.

Adults who choose not to get vaccinated, will need to self-isolate if identified as a close contact of someone with COVID-19.

All adults and children that have a positive test for COVID-19 or are told to do by NHS Test and Trace should self-isolate. This means not leaving home because you have or might have coronavirus (COVID-19). This is a legal requirement.

If someone lives with someone who has symptoms or tested positive, they will need to self-isolate unless:

- they are fully vaccinated – this means 14 days have passed since a second dose of an approved COVID-19 vaccine
- they are under 18 years and 6 months old

If someone who is fully vaccinated lives with someone who has symptoms or tested positive, whether or not they have symptoms, they are strongly advised to do daily rapid lateral flow tests (1 a day for 7 days), consider limiting contact with people who are at higher risk from COVID-19 and tell people who have been in close in close contact within the past 48 hours that they have been in close contact with people you have symptoms.

If someone tests positive, the self-isolation period includes the day symptoms started (or the day of the test if there weren't any symptoms) and next 10 full days. This will need to continue for longer if symptoms emerge or do not go away. The self-isolation can end after 7 days if rapid lateral flow tests on days 6 and 7 of the self-isolation period, with the tests at least 24 hours apart, are both negative and there is not a high temperature.

Self-isolating can stop after the 10 days if either there are no symptoms or the symptoms are limited to just a cough or changes to the sense of smell or taste as these can last for weeks after the infection has gone.

Where a member of the trust central team is a contact of a positive case, they will take greater care than usual when visiting schools if they are not required to self-isolate, such as holding meetings with social distancing and avoiding classrooms and the staff room.

If anyone in the school develops covid-19 symptoms, however mild, they will be sent home and they should follow public health advice. Not all coughs will be covid-19.

Everyone with symptoms should avoid using public transport and, wherever possible, be collected by a member of their family or household to return home.

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. Any rooms they use should be cleaned after they have left.

In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others. If a parent or carer insists on a pupil attending, we can take the decision to refuse the pupil if, in our reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Any such would need to be carefully considered in light of all the circumstances and current public health advice.

All staff and secondary agreed children are asked to continue to use home testing kits test twice weekly at home. All secondary aged children will be asked to have a covid test on site at school at the start of the spring term.

Staff and pupils with a positive LFD test result should self-isolate. They will also need to get a free PCR test to check if they have COVID-19 via *Get a free PCR test* to check if you have coronavirus (COVID-19) - GOV.UK (www.gov.uk); 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, it overrides the self-test LFD test and the individual can return to school, as long as the individual doesn't have COVID-19 symptoms.

Other considerations

- Where there is an outbreak the school will consider measures to reduce mixing between classes such as meals taken separately and specific times to use toilets that would otherwise be shared.
- We encourage all staff and eligible pupils to take up the offer of two vaccinations, and adults the booster too; we do not keep a record of those who have been vaccinated and do not discriminate against those who have not had two vaccinations. Staff that have not had two vaccinations, and so would have to self-isolate if identified as a close contact of someone who tests positive, are asked to make their headteachers aware of this. We are supporting the vaccination of 12-15 year olds in schools. We appreciate that staff and pupils may require time off to attend vaccination appointments including booster appointments which will be authorised. We acknowledge that on occasion the vaccine can result in side effects which may trigger an absence for which allowances will be made.
- Face coverings should be worn in enclosed and crowded spaces where there is contact with people not normally met - this includes public transport and dedicated transport to school or college.
- Staff from the central team that visit a school will wear a face covering in any congested area
- Public health advice will be sought if there are significant concerns, including as set out in the outbreak management plan below, or if a pupil, student, child or staff member is admitted to hospital with COVID-19.
- All children and young people previously referred to as clinically extremely vulnerable (CEV) 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.
- School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is required to self-isolate or quarantine because of covid-19 in accordance with relevant legislation or guidance they are recorded as:
 - code X (not attending in circumstances related to covid-19)
 - code I (illness) - where they are unable to attend because they have a confirmed case of covid-19

- for pupils abroad who are unable to return, code X is unlikely to apply - in some specific cases, code Y (unable to attend due to exceptional circumstances) will apply

- Travel and quarantine - Parents travelling abroad should bear in mind the impact on their child's education which may result from any requirement to quarantine or isolate upon return, and avoid any travel that may be likely to involve reduced school attendance
- Remote education – the school is maintaining its capacity to deliver high-quality remote education for the next academic year, including to 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 and for pupils who are abroad, and facing challenges to return due to covid-19 travel restrictions, for the period they are abroad; remote education provided will be equivalent in length to the core teaching pupils receive in school; where necessary, we expect to work collaboratively with families and put in place reasonable adjustments so that pupils with special educational needs and disabilities (SEND) can successfully access remote education.
- The HR team will assist with individual risk assessments for clinically extremely vulnerable (CEV) staff, pregnant staff and staff who have not / will not receive the vaccine due to various personal / medical reasons and identify themselves as requiring alternative safety measures to receiving the vaccine i.e. continued use of face coverings / PPE.
- School meals – where a child is entitled to a Free School Meal, but is required to isolate or is not in school due to Covid19 a voucher will be provided to the family to cover the cost of the meal. School Administrators will apply for the vouchers via fsm@unitysp.co.uk
- A separate risk assessment will be carried out for each educational visit, extra-curricular provision, breakfast clubs and after school provision

Outbreak management plan

This outlines how our school will operate if any of the measures described below are recommended by Government or Public Health England for our area, or if any of these thresholds are reached:

- 5 children, pupils or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period

- 10% of children, pupils or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period
- For special schools, 2 children, pupils and staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period

We consider close mixing to include:

- all in a nursery class
- a friendship group who often play together
- staff and children taking part in the same activity session together
- a class, form group or subject class
- a friendship group mixing at breaktimes
- sports team
- a group in an after-school activity
- a tutor offering one-to-one tuition to a child, or to multiple children at the same time

At the point of reaching a threshold, we will review and reinforce the testing, hygiene and ventilation measures already in place and consider:

- whether any activities could take place outdoors, including exercise, assemblies, or classes
- any ways to improve ventilation indoors, where this would not significantly impact thermal comfort
- one-off enhanced cleaning focussing on touch points and any shared equipment

We will seek additional public health advice from the DfE helpline (0800 046 8687, option 1) local public health, and consider the extent to which we additional actions should be taken because it is assessed that transmission is likely to be occurring in the schools. These actions could include the following. for a short period without having reached the outbreak stage

- further encouragement to students to undertake twice weekly rapid asymptomatic home testing and reporting
- temporarily reinstating face coverings for staff and secondary aged students in classrooms
- increased frequency of testing

We would limit:

- residential educational visits

- open days
- transition or taster days
- parental attendance
- performances

In extreme cases, and as a last resort where all other risk mitigations have not broken chains of in-school transmission, the school may be advised to introduce short-term attendance restrictions, such as sending home a class or year group - remote learning would then be provided for all pupils well enough to learn from home. On-site provision will in all cases be retained for vulnerable children and the children of critical workers.