

COVID-19 risk assessment – School operation from September 2021

Site / school name:	Brookwood Primary School		
Name(s) of person(s) covered by this assessment:	<ul style="list-style-type: none"> ▪ Students ▪ Staff: <ul style="list-style-type: none"> ▪ Classroom based staff ▪ Office / administrative staff ▪ Premises / site staff ▪ Cleaning staff ▪ Catering staff ▪ SMSAs ▪ Contractors ▪ Visitors 		
Tasks and activities covered by this risk assessment:	<ul style="list-style-type: none"> ▪ School's operation from September 2021 after Step 4 ▪ Cleaning and sanitisation ▪ Adequate ventilation ▪ Testing and measures to manage isolation and confirmed cases of COVID-19 ▪ Contingency planning 		
Equipment and materials used:	<ul style="list-style-type: none"> ▪ General class and teaching materials ▪ Practical equipment and materials ▪ Sports and PE equipment ▪ Cleaning materials and equipment 		
Location(s) covered by this risk assessment:	<ul style="list-style-type: none"> ▪ All school premises and grounds 		
Name of person completing this risk assessment:	David Gunning and Yola Wilkins	Date of completion:	27 th August 2021
Risk assessment approved by:		Date of approval:	
Date risk assessment to be reviewed by:		Risk assessment no:	Version 1.1 – 24 August 2021

Record of risk assessment reviews

Date of review:	24/08/2021	Reviewed by:	Jon Robinson	Comments / date of next review:	<ul style="list-style-type: none"> ▪ Changes made to reflect updated DfE Schools COVID-19 Operational Guidance dated 17 August 2021 ▪ Main changes include: <ul style="list-style-type: none"> ▪ Updated to clarify that 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. ▪ Update to make clear who is no longer required to isolate if identified as a close contact ▪ Added additional detail on what close contacts should do whilst awaiting their PCR test results ▪ Updated information on boarding school pupils attending from abroad, as quarantine rules have changed ▪ Updated information on contingency planning in schools ▪ References removed to step 4 ▪ All changes have been highlighted in yellow in the body of risk assessment
Date of review:		Reviewed by:		Comments / date of next review:	<ul style="list-style-type: none"> ▪
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Key changes in approach

Mixing and bubbles

- We no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). This means that bubbles will not need to be used for any summer provision (for example, summer schools) or in schools from the autumn term.
- As well as enabling flexibility in curriculum delivery, this means that assemblies can resume, and you no longer need to make alternative arrangements to avoid mixing at lunch.

Tracing close contacts and isolation

- Settings only needed to do contact tracing up to and including 18 July. Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing.
- As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent 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. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.
- 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:
 - they are fully vaccinated
 - they are below the age of 18 years and 6 months
 - they have taken part in or are currently part of an approved COVID-19 vaccine trial
 - they are not able to get vaccinated for medical reasons

Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so.

- Staff 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.
- 18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the 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.
- Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.

Face coverings

- Face coverings are no longer be advised for pupils, staff and visitors either in classrooms or in communal areas
- 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 and dedicated transport to school or college.
- If you have a substantial increase in the number of positive cases in your school, a director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility.

Stepping measures up and down

- You should have contingency plans (sometimes called outbreak management plans) outlining how you would operate if there were an outbreak in your school or local area.
- Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission.
- For most settings it will make sense to think about taking extra action if the number of positive cases substantially increases. Information on what circumstances might lead you to consider taking additional action, and the steps you should work through, can be found in the contingency framework.
- 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) and PHE 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 outbreak management responsibilities.

Control measures

You should:

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.

Risk assessment	
What are the hazards?	<ul style="list-style-type: none">▪ Potential for spread of COVID-19 between persons at school showing symptoms of coronavirus or those who are confirmed to have coronavirus.
Who might be harmed and how?	<ul style="list-style-type: none">▪ Staff, pupils, contractors, and visitors may catch COVID-19 via direct or indirect contact with carriers whilst on site.▪ Potential for spread to other family members / persons.
<p>Note: We have specifically removed any rating or scoring from this risk assessment. We do not feel this adds any significant benefit to this untypical situation. You may wish to prioritise any actions, but the basis of the approach to mitigating the risks from coronavirus is such that all measures should be carried out alongside each other rather than in sequence. The planning and assessment you undertake will form the basis of an overall plan to manage the risks specific to your setting which is the most important aspect of this process.</p>	

This risk assessment is based on Department for Education (DfE) School's coronavirus (COVID-19) operational guidance (applies from Step 4) as published on 17 August 2021.

<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance>

DfE Guidance	Measures to consider	What do you need to do at your school to manage this	Who will do this?	By when?	Completed on:
1. Ensure good hygiene for everyone					
Hand hygiene					
<ul style="list-style-type: none"> ▪ Frequent and thorough hand cleaning should now be regular practice. ▪ You should continue to ensure that pupils clean their hands regularly. ▪ This can be done with soap and water or hand sanitiser. 	<ul style="list-style-type: none"> ▪ Consider how often pupils and staff will need to wash their hands and incorporate time for this in timetables or lesson plans. ▪ Are there enough hand washing or hand sanitiser ‘stations’ available so that all pupils and staff can clean their hands regularly? ▪ Ensure supervision of hand sanitiser use given the risks around ingestion. Skin friendly skin cleaning wipes can be used as an alternative. ▪ Build these routines into school culture, supported by behaviour expectations and helping ensure younger pupils and those with complex needs understand the need to follow them ▪ Sufficient cleaning supplies and hand soap to be maintained. ▪ All staff should be briefed weekly as a minimum on expected hygiene standards. ▪ All staff instructed to actively monitor to ensure all pupils and colleagues are adhering to principles of good hygiene. ▪ CLEAPSS current advice is that alcohol based hand gels should not be used in science labs and D&T rooms where practical activities take place. CLEAPSS guidance is understood to be under review. 	<ul style="list-style-type: none"> ▪ All classrooms have sinks. ▪ Hand sanitiser is available in all classrooms and administered under supervision by an adult. ▪ Hand sanitiser will be used when sinks cannot be readily accessed or where it will expedite children’s readiness to learn during key transitions throughout the school day (see below). ▪ Children to wash their hands at regular times throughout the day: on arrival; before morning break; before afternoon break (only applicable in KS1). ▪ Children will be given hand sanitiser while seated at their desks on return from morning break; and before and after lunch. ▪ Families have been made aware that sanitiser contacts alcohol and given the opportunity to withdraw from this if they do not wish their children to use it. Any children without permission for hand sanitiser will wash their hands at transitions where other children are receiving sanitiser. 			

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		<ul style="list-style-type: none"> ▪ Stocks of soap and sanitiser are checked weekly and orders placed as required. ▪ Posters on handwashing procedures are displayed at all sinks. ▪ Small children / children with additional needs will be supervised / supported while washing their hands. ▪ Staff have been provided with personal hand sanitiser bottles to wear on lanyards for use as required, including when administering first aid outside. 			
Respiratory hygiene					
<ul style="list-style-type: none"> ▪ The 'catch it, bin it, kill it' approach continues to be very important 	<ul style="list-style-type: none"> ▪ Are there enough tissues and bins available in the school to support pupils and staff to follow this routine? ▪ Ensure that younger children and those with complex needs are helped to get this right. ▪ Are there risk assessments in place for pupils with complex needs who will struggle to maintain as good respiratory hygiene as their peers? ▪ All staff should be briefed weekly as a minimum on expected hygiene standards. 	<ul style="list-style-type: none"> ▪ Bins are located in every classroom. ▪ Lids have been removed from bins to avoid touching surfaces. ▪ Tissues are re-stocked regularly by the Caretaker and subject to weekly stock check. ▪ All children with individual needs who are unable to maintain good respiratory hygiene have risk assessments and plans, which have been shared with staff as appropriate. 			

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	<ul style="list-style-type: none"> ▪ All staff instructed to actively monitor to ensure all pupils and colleagues are adhering to principles of good hygiene. 	<ul style="list-style-type: none"> ▪ Posters have been displayed and assemblies held on ‘catch it, bin it, kill it’. ▪ Staff briefings will include a regular reminder and updates on good hygiene standards. ▪ Staff are free to choose to wear a face covering if they wish to do so. ▪ Any visitors who are entering the school, including contractors, will be asked to wear face coverings in communal spaces. 			
Use of personal protective equipment					
<ul style="list-style-type: none"> ▪ Most staff in schools will not require PPE beyond what they would normally need for their work. ▪ If a pupil already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used. ▪ Additional PPE for COVID-19 is only required in a very limited number of scenarios, for example, when: <ul style="list-style-type: none"> ▪ If a pupil becomes ill with COVID-19 symptoms, and only then if close contact is necessary ▪ When performing aerosol generating procedures (AGPs) ▪ Reference to PPE for higher risk situations means: 	<ul style="list-style-type: none"> ▪ Where staff have been identified as needing PPE, have they been provided with appropriate supplies? ▪ Have staff identified as needing PPE been provided with appropriate training and information on correct use and disposal? 	<ul style="list-style-type: none"> ▪ PPE equipment is kept in Reception and Year 1 in the event of the need for intimate care. ▪ PPE is also kept in the isolation room – the small office outside year 3 – for use where a child is symptomatic and staff members cannot remain socially distanced. ▪ No one is to enter the isolation room while a child is in there and until the room has been cleaned. ▪ PPE should be worn by staff when isolation rooms are being cleaned. 			

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<ul style="list-style-type: none"> ▪ Fluid-resistant surgical face masks (also known as Type IIR) ▪ Disposable gloves ▪ Disposable plastic aprons ▪ Eye protection (for example a face visor or goggles) ▪ The PPE that should be used in the following situations when caring for someone with symptoms of COVID-19 is: <ul style="list-style-type: none"> ▪ A face mask should be worn if close contact is necessary ▪ If contact is necessary, then gloves, an apron and a face mask should be worn ▪ Eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting 		<ul style="list-style-type: none"> ▪ List of rules for the isolation room has been written, communicated and displayed. ▪ In the PPE Kit there are instructions for donning and doffing. ▪ There is also a log to record when PPE is used. ▪ Staff should notify the office team when PPE resources need to be replenished. ▪ Staff should, as a minimum, wear gloves when administering first aid in line with normal procedures. 			
Face coverings					
<ul style="list-style-type: none"> ▪ Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas ▪ 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 and dedicated transport to school or college. 	<ul style="list-style-type: none"> ▪ Review use of face coverings for enclosed and crowded spaces including where you would meet people you do not normally come into contact with. ▪ Recommend use on all school transport, public or dedicated. ▪ Consider face coverings for events such as open days and productions. 	<ul style="list-style-type: none"> ▪ Face coverings will be required for any events where parents are invited into the building. ▪ Visitors who do not routinely come into school will be asked to wear a face covering in communal areas. 			

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<ul style="list-style-type: none"> If you have a substantial increase in the number of positive cases in your school, a director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility. 					
2. Maintain appropriate cleaning regimes, using standard products such as detergents					
<ul style="list-style-type: none"> You should put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. If any new cleaning, sanitisation, or other products are used then they should be assessed as with any other hazardous substance. 	<ul style="list-style-type: none"> Is there an enhanced cleaning regime in place and are all cleaners and staff aware of measures to take? Are high contact items such as door handles, including main entrance doors and commonly used doors cleaned more frequently? 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. Shared equipment should be regularly cleaned. Ensure that any hazardous substances that are used because of changes to cleaning or hygiene regimes have a COSHH risk assessment. 	<ul style="list-style-type: none"> Each classroom has a dedicated box of cleaning supplies A designated member of staff should ensure that cleaning has taken place once each day within the classroom and toilet areas, with the cleaners to complete a thorough evening clean. A log is in place for cleaning in the classroom and toilet areas. Staff briefings will regularly include hygiene reminders. High use internal touch points will be cleaned by the office team once a day, with the cleaners completing a thorough evening clean. Shared desk spaces will be sanitised between uses. Photocopier will be sanitised between uses. 			

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3. Keep occupied spaces well ventilated					
<ul style="list-style-type: none"> ▪ When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained. ▪ You should identify any poorly ventilated spaces as part of your 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, for example school plays. ▪ Mechanical ventilation is a system that uses a fan to draw fresh air, or extract air from a room. These should be 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. ▪ If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply. ▪ Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations. ▪ Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist 	<ul style="list-style-type: none"> ▪ If air handling systems that move air between rooms are used set them to use a fresh air supply and do not recirculate air. Standalone room units can operate as normal. ▪ Ensure any filters in ventilation or air conditioning systems are changed as per manufacturer instructions. Take additional care when changing filters. ▪ Airing rooms as frequently as you can, will help improve ventilation. This involves opening all doors and windows wide to maximise the ventilation in the room. It may be easier to do this when the room is unoccupied or between uses particularly in colder or adverse weather. ▪ Manage colder temperatures in rooms by opening high level not low level windows, opening window just enough to allow for ventilation, increasing heating and allowing for flexibility on uniform. ▪ Identify any poorly ventilated areas and consider if these areas should be restricted or if ventilation can be improved by increasing the flow of fresh air. ▪ Desk or ceiling fans can be used provided the area is well ventilated but 	<ul style="list-style-type: none"> ▪ Ensure windows are open in classrooms / learning spaces as long as this does not compromise a comfortable learning environment. As a minimum, high level windows should be open. ▪ When the outside temperature is cold, staff are encouraged to purge the classrooms when possible while children are at break. ▪ Windows to be open in isolation room. ▪ Internal fire doors to be propped open but shut at the end of the day (caretaker responsible for this) in order to avoid touching door handles where possible and to enhance air flow. ▪ The door at the top of the stairs (year 5 and 6) to remain closed. ▪ Windows to be opened in the dining room, intervention area outside year 4, library, main office, hall, finance and admin office and wellbeing hub daily. ▪ Headteacher's office has poor ventilation – door will be propped open when 			

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<p>with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so).</p> <ul style="list-style-type: none"> You should balance the need for increased ventilation while maintaining a comfortable temperature. 	<p>they should not be used in poorly ventilated areas.</p> <ul style="list-style-type: none"> With due regard to fire safety, some doors may be temporarily propped open to limit touching of door handles and aid ventilation. Fire doors including doors at the top and base of stairs, or to higher risk areas of fire starting e.g. kitchens / IT suites / plant rooms should not be propped open. Where events such as school plays or open days are planned consider the need to improve ventilation as part of your planning. 	<p>appropriate to enable air to flow throughout the day.</p> <ul style="list-style-type: none"> Separate risk assessments will be written for any special events such as open days or school plays although for at least the first half of the Autumn term there are no plans to invite large groups of parents into school. 			
<p>4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19</p>					
<p>When an individual develops COVID-19 symptoms or has a positive test</p>					
<ul style="list-style-type: none"> 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 symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine). If anyone in your school develops COVID-19 symptoms, however mild, you should send them home and they should follow public health advice. If a pupil in a boarding school shows symptoms, they should usually self-isolate in their residential setting so that their usual support can continue, 	<ul style="list-style-type: none"> Is there a procedure for managing suspected or positive cases of coronavirus? Consider what information or measures may be needed at school gates and entrances to the building, as well as on the school website. How will visitors to site be managed? Is there an appropriate room identified that can be used to isolate someone with symptoms whilst they are awaiting collection? Have welfare staff and others been trained in measures to take? Have welfare staff and others been provided with PPE and training on its use and disposal? 	<ul style="list-style-type: none"> If a child has symptoms, a member of SLT will be notified and they will authorise arrangements for the child and any siblings to wait in the isolation room and then to be sent home. If a child is unwell, their temperature may be taken as part of their care. Designated isolation room for anyone with symptoms to wait – small office outside year 3. Parents to email the school with results of PCR test as soon as possible. 			

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<p>others may then benefit from self-isolating in their family home.</p> <ul style="list-style-type: none"> ▪ For everyone with symptoms, they should avoid using public transport and, wherever possible, be collected by a member of their family or household. ▪ 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. ▪ The household (including any siblings) should follow the PHE stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection. 		<ul style="list-style-type: none"> ▪ Standing item on the newsletter with details of the symptoms and advice on what to do if any individual experiences symptoms. ▪ Posters have been displayed in and around school with information about Covid, including on the gates and the main entrance. ▪ Staff will be reminded of the appropriate procedures in the event of a symptomatic child at the beginning of the autumn term and regularly briefed thereafter. ▪ Staff will be reminded to keep track of PPE, first aid and cleaning supplies and request more before stocks run out. ▪ On line declaration form for visitors to complete prior to entry to school. ▪ Visitors requested to wear face coverings in communal areas when inside the school. 			
Cleaning a room or area after a person with symptoms of COVID-19, or confirmed COVID-19, has left the setting					
<ul style="list-style-type: none"> ▪ The minimum PPE to be worn for cleaning an area after a person with symptoms of COVID-19, or confirmed COVID-19, has left the setting, is disposable gloves and an apron. Wash 	<ul style="list-style-type: none"> ▪ Is there a procedure in place for cleaning an area where a person with symptoms of COVID-19 or a confirmed case of COVID-19 has been? ▪ Is the appropriate PPE being used? 	<ul style="list-style-type: none"> ▪ Isolation room has bleach-based spray cleaner, disposable cloths / paper towels and a full stock of PPE. 			

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<p>hands with soap and water for 20 seconds after all PPE has been removed.</p> <ul style="list-style-type: none"> ▪ If a risk assessment of the setting indicates that a higher level of virus may be present then additional PPE to protect the cleaner’s eyes, mouth and nose may be necessary. ▪ 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. ▪ 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, telephones, grab rails in corridors and stairwells. ▪ 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: <ul style="list-style-type: none"> ▪ 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.). 	<ul style="list-style-type: none"> ▪ Are appropriate cleaning products or methods being used? 	<ul style="list-style-type: none"> ▪ Yellow hazard bags available for contaminated waste. ▪ All furniture in the isolation room is plastic / hard surfaces and cleaned using the bleach-based spray. ▪ All cleaning items such as paper towels, mop heads, will be disposed of securely afterwards. ▪ Isolation room rules have been shared with staff, are displayed on the door and include key actions required when managing a symptomatic individual and cleaning the room thereafter. ▪ In addition to cleaning the isolation room, any other areas in the school that the person has touched need to be cleaned (eg. Door handles; phones). ▪ Staff cleaning the isolation room must wear PPE. ▪ Contract cleaners are commissioned to deep clean rooms in the event of a positive case. 			

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<p>Follow manufacturer’s instructions for dilution, application and contact times for all detergents and disinfectants or</p> <ul style="list-style-type: none"> ▪ 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 contaminated waste ▪ When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used. 					
Contaminated waste					
<ul style="list-style-type: none"> ▪ Contaminated or potentially contaminated waste must be dealt properly to reduce the risk of the spread of coronavirus. 	<ul style="list-style-type: none"> ▪ 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: <ul style="list-style-type: none"> ▪ 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 	<ul style="list-style-type: none"> ▪ Yellow hazard bags in place and used for any first aid and any suspected case. ▪ All waste is double-bagged. ▪ Secure place for waste to be stored until results of test are known – in the locked cupboard in the Headteacher’s office - clearly labelled so it is clear where the waste has come from and the date. ▪ Waste will then be stored for 72 hours or disposed of sooner 			

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	<ul style="list-style-type: none"> ▪ 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 the individual tests negative, this can be disposed of immediately with the normal waste. ▪ If COVID-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste. 	<p>if a negative test result is received.</p>			
Asymptomatic testing					
<ul style="list-style-type: none"> ▪ 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. ▪ Over the summer, staff and secondary pupils should continue to test regularly if they are attending settings that remain open, such as summer schools and out of school activities based in school settings. Schools will only provide tests for twice weekly asymptomatic testing for pupils and staff over the summer period if they are attending school settings. 	<ul style="list-style-type: none"> ▪ Plan for retaining a small on site testing centre in secondary schools only. ▪ Complete a risk assessment for the testing process relevant for your setting (templates are available). ▪ Communicate procedures for continued testing for the start of term and during September and continue to encourage take up of testing. ▪ 	<ul style="list-style-type: none"> ▪ Staff who have attended school during the summer break have continued to test before coming on site. ▪ All other staff to re-commence LFD testing before attending the Inset day in September and then twice-weekly thereafter until advised otherwise. ▪ LFD risk assessment is in place ▪ LFD co-ordinators are in place and are managing the process of issuing kits and recording results. ▪ All staff have been offered the opportunity to regularly test via LFDs. 			

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<ul style="list-style-type: none"> ▪ However, testing will still be widely available over the summer and kits can be collected either from your local pharmacy or ordered online. ▪ As pupils will potentially mix with lots of other people during the summer holidays, all secondary school pupils should receive 2 on-site lateral flow device tests, 3 to 5 days apart, on their return in the autumn term. ▪ Settings may commence testing from 3 working days before the start of term and can stagger return of pupils across the first week to manage this. Pupils should then continue to test twice weekly at home until the end of September, when this will be reviewed. ▪ Staff should undertake twice weekly home tests whenever they are on site until the end of September, when this will also be reviewed. ▪ Secondary schools should 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. ▪ There is no need for primary age pupils (those in year 6 and below) to test over the summer period. They will be offered the 2 tests at an ATS at the beginning of the autumn term when they start at their secondary school as a new year 7. Schools may choose, 					

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<p>however, to start testing year 6 pupils earlier, including in summer schools, depending on their local circumstances.</p>					
Confirmatory PCR tests					
<ul style="list-style-type: none"> ▪ 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 COVID19. ▪ 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 pupil can return to school, as long as the individual does not have COVID-19 symptoms. ▪ Additional information on PCR test kits for schools and further education providers is available. 	<ul style="list-style-type: none"> ▪ Ensure staff, students and parents understand what to do in the event of a positive test, including arranging a confirmatory PCR test. ▪ Ensure that staff, students, and parents understand that symptomatic testing still needs to take place and that it can be booked online. 	<ul style="list-style-type: none"> ▪ All staff and parents have received regular briefings on what to do in the event of a positive lateral flow test, and the procedure for seeking a test if symptomatic. ▪ A more detailed letter is handed to parents when collecting symptomatic children. ▪ Parents to inform school via email in the event of a positive test result. ▪ If the school is made aware that a member of staff has a positive case, the Self-Isolation Service Hub will be contacted. ▪ Close contacts will only need to isolate if they are 18 or over and have not had both vaccines; or if they are symptomatic. ▪ Close contacts attending school will be given specific advice including: seek a PCR test, wear masks in enclosed spaces, and limit contact with anyone who is CEV. 			

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		<ul style="list-style-type: none"> ▪ Will engage with national Test and Trace programme as required. ▪ Stock of home testing kits available should families struggle to access a PCR through other means. 			
Tracing close contacts and isolation					
<ul style="list-style-type: none"> ▪ Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. ▪ 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. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. ▪ 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"> ▪ they are fully vaccinated ▪ they are below the age of 18 years and 6 months 	<ul style="list-style-type: none"> ▪ Communicate latest requirements on who is required to isolate and who is not to the school community. ▪ Encourage those contacted by NHS Test and Trace to take a PCR test where advised to do so. ▪ Advise that those who do not need to self-isolate who have been identified as a close contact can attend school as normal and do not need to wear a face covering in schools, but that it is expected that they should wear a face covering on public and school transport. ▪ Work with NHS Test and Trace and local health protection teams where requested. 	<ul style="list-style-type: none"> ▪ Staff to be updated in advance of the Inset day via Teams recording ▪ Parents to be updated in advance of the return to school. ▪ We will work with NHS Test and Trace and local health protection teams as required. 			

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<ul style="list-style-type: none"> ▪ they have taken part in or are currently part of an approved COVID-19 vaccine trial ▪ they are not able to get vaccinated for medical reasons ▪ Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so. ▪ Staff 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. ▪ 18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the 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. ▪ Settings will continue to have a role in working with health protection teams 					

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<p>in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.</p>					
Other considerations					
Clinically extremely vulnerable (CEV) children					
<ul style="list-style-type: none"> ▪ All CEV children and young people should attend their education setting unless they are <ul style="list-style-type: none"> ▪ one of the very small number of children and young people under paediatric or other specialist care who have been advised by their GP or clinician not to attend. ▪ Further information is available in the guidance on supporting pupils at school with medical conditions. 	<ul style="list-style-type: none"> ▪ Identify any pupils who may not be able attend school, where they have received specific medical advice. All other CEV pupils should attend school. ▪ Ensure there is provision for remote education for those unable to attend school. ▪ Monitor engagement with remote education. 	<ul style="list-style-type: none"> ▪ There are no children at the school who have been advised not to attend currently. ▪ Where a child is CEV, we will continue to work with parents and medical professionals. ▪ Remote education plan is in place and new teaching staff have been briefed regarding this. 			
Contractors and visitors to the school					
<ul style="list-style-type: none"> ▪ You should ensure that key contractors and visitors are aware of the school's control measures and ways of working. 	<ul style="list-style-type: none"> ▪ Inform contractors and visitors prior to arrival of any specific measures in place. ▪ Ensure staff hosting contractors and visitors are aware of their responsibilities. 	<ul style="list-style-type: none"> ▪ Prior to arrival, visitors are asked to complete an online declaration form ▪ Sign-in process for visitors minimises touch points – office team sign visitors in; lanyards once returned are quarantined. Fire and safeguarding procedures are displayed for visitors to view without the need for touch. 			

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		<ul style="list-style-type: none"> Visitors requested to wear face coverings in communal areas when inside the school. 			
Admitting children into school					
<ul style="list-style-type: none"> 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 your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Your decision would need to be carefully considered in light of all the circumstances and current public health advice. 	<ul style="list-style-type: none"> Communicate with parents on process that pupils with symptoms should not attend and that they may not be allowed to attend school to protect other persons. 	<ul style="list-style-type: none"> Standing item on weekly newsletter Parents have been sent information explaining difference between LFD test and PCR 			
Attendance					
<ul style="list-style-type: none"> 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. 	<ul style="list-style-type: none"> Communicate with parents on requirements for attendance. Put in place measures to keep in contact with vulnerable children. 	<ul style="list-style-type: none"> Communicated to parents at Headteacher briefings and will be reinforced regularly during autumn term. Attendance monitoring takes place in line with normal school procedures – this includes vulnerable children. 			
Travel and quarantine					
<ul style="list-style-type: none"> Where pupils travel from abroad to attend a boarding school, you will need 	<ul style="list-style-type: none"> Continue to communicate and engage with families. 	<ul style="list-style-type: none"> School are aware of where children / families have 			

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<p>to explain the rules to pupils and their parents before they travel to the UK.</p> <ul style="list-style-type: none"> ▪ All pupils travelling to England must adhere to travel legislation, details of which are set out in government travel advice. ▪ Boarding school pupils who are ordinarily resident in the UK, including those who are unaccompanied and who are attending boarding schools on a child student visa or student visa, who have travelled from or through amber list countries (and have not been in a red country in the previous 10 clear days), are exempt from the requirements to quarantine and take a day 8 test. ▪ 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. More information is provided in the government's quarantine and testing guidance. ▪ 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 	<ul style="list-style-type: none"> ▪ Continue to communicate and engage with families. ▪ Consider arrangements for provision of remote education and assessment for pupils who are abroad where appropriate. ▪ Review arrangements for any pupils travelling from abroad where needed. ▪ Review arrangements for boarding school pupils who are ordinarily resident in the UK. 	<p>travelled abroad – this is managed on a case-by-case basis in line with government guidelines.</p>			

DfE Guidance	Measures to consider	What do you need to do at your school to manage this	Who will do this?	By when?	Completed on:
<p>requirement to quarantine or isolate upon return.</p>					
Remote education					
<ul style="list-style-type: none"> ▪ Not all people with COVID-19 have symptoms. Where appropriate, you should 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. Schools subject to the remote education temporary continuity direction are required to provide remote education to pupils covered by the direction where their attendance would be contrary to government guidance or legislation around COVID-19. ▪ You should maintain your 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. ▪ 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. 	<ul style="list-style-type: none"> ▪ Have plans in place for high quality remote provision of education for those unable to attend school. ▪ Have plans in place and work with families to have appropriate provision for pupils with SEND. 	<ul style="list-style-type: none"> ▪ Remote learning plan is in place for those children who are unable to attend school due to self-isolation. ▪ Arrangements for children with SEND are explicit within the plan. 			

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<ul style="list-style-type: none"> The remote education provided should be equivalent in length to the core teaching pupils would receive in school. You should work collaboratively with families and put in place reasonable adjustments so that pupils with SEND can successfully access remote education. 					
Pupil wellbeing and support					
<ul style="list-style-type: none"> Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. You can access useful links and sources of support on promoting and supporting mental health and wellbeing in schools. 	<ul style="list-style-type: none"> Take a whole school, coordinated and evidence-informed approach to mental health and wellbeing. Consider the provision of pastoral and extra-curricular activities for pupil wellbeing and support where appropriate. Provide more focused pastoral support where issues are identified that individual pupils may need help with, including support resources available from DfE and partners. Consider support needs of groups that you are already aware need additional help (for example, children in need), and any groups you identify as newly vulnerable because of the pandemic. Communicate what help is available to families. 	<ul style="list-style-type: none"> Increased SEMH and pastoral support in place for children with identified needs. Whole school PSHE curriculum is focused on wellbeing. Section on the website under “Our School / Pastoral / SEMH Support” sets out the help available to families. 			
School workforce					
<ul style="list-style-type: none"> School leaders are best placed to determine the workforce required to meet the needs of their pupils. 	<ul style="list-style-type: none"> Share this risk assessment with staff and invite feedback. 	<ul style="list-style-type: none"> Risk assessment to be shared with staff via email prior to Inset day on 1st September, 			

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<ul style="list-style-type: none"> Clinically extremely vulnerable (CEV) people are no longer advised to shield but may wish to take extra precautions to protect themselves, and to follow the practical steps set out in the CEV guidance to minimise their risk of exposure to the virus. Staff in schools who are CEV should currently attend their place of work if they cannot work from home. DHSC will publish updated guidance before Step 4. We welcome your support in encouraging vaccine take up and enabling staff who are eligible for a vaccination to attend booked vaccine appointments where possible even during term time. 	<ul style="list-style-type: none"> Carry out individual risk assessments and discussions as required. 	<ul style="list-style-type: none"> along with a Teams recording which will explain the main points and our arrangements for the autumn term. Staff will be invited to email questions and these will be collated, then the answers circulated to all. Opportunity for staff to meet with SLT individually in the event of significant concerns or queries before the start of term. Individual risk assessments are in place for identified staff and reviewed as appropriate. 			
Educational visits					
<ul style="list-style-type: none"> Given the likely gap in COVID-19 related cancellation insurance, if you are considering booking a new visit, whether domestic or international, you are advised to ensure that any new bookings have adequate financial protection in place. We continue to recommend you do not go on any international visits before the start of the autumn term. From the start of the new school term you can go on international visits that have previously been deferred or postponed and organise new international visits for the future. 	<ul style="list-style-type: none"> For any new bookings COVID-19 cancellation related insurance is advised. Ensure staff are aware of the latest information regarding trips including the latest travel advice from the FCO on international travel. Where trips are planned, COVID-19 must be considered as part of the risk assessment process including identifying any additional mitigation measures that may be needed. 	<ul style="list-style-type: none"> All trips and visits are planned and risk assessed in line with the Bourne Education Trust policy. 			

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<ul style="list-style-type: none"> ▪ You should 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 you must comply with international travel legislation and should have contingency plans in place to account for these changes. ▪ You should speak to either your visit provider, commercial insurance company, or the Risk Protection Arrangement (RPA) to assess the protection available. Independent advice on insurance cover and options can be sought from the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI). Any school holding ATOL or ABTA refund credit notes may use these credit notes to rebook educational or international visits. ▪ You should undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment. General guidance about educational visits is available and is supported by specialist advice from the Outdoor Education Advisory Panel (OEAP). 					

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Wraparound provision and extra-curricular activity					
<ul style="list-style-type: none"> ▪ Out-of-school settings and wraparound childcare providers can offer provision to all children, without restriction on the reasons for which they may attend. ▪ Wraparound childcare and other organised activities for children may take place in groups of any number. ▪ At Step 4, we will no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). ▪ Close contacts will be identified via NHS Test and Trace and out-of-school settings will not be expected to undertake contact tracing. ▪ We no longer advise that providers limit the attendance of parents and carers at sessions. You should continue to ensure that you have parents' and carers' most up-to date contact details in case of an emergency. ▪ All sports provision, including competition between settings, should be planned and delivered in line with current guidance. 	<ul style="list-style-type: none"> ▪ Have cleaning arrangements been considered, particularly for frequently touched surfaces and any equipment that is shared. ▪ Ensure there is clear communication with any external providers on school measures and approach. ▪ Consider contingency arrangements and planning in place in case of any local public health protection advice. 	<ul style="list-style-type: none"> ▪ A selection of clubs will be available during the autumn term for families to access before and after school. ▪ Cleaning will take place after clubs have concluded each day and materials will be provided to facilitate this. ▪ Children attending clubs are expected to wash their hands regularly. ▪ Risk assessment and Covid measures have been shared with external providers. 			
Contingency planning / outbreak management plan					
<ul style="list-style-type: none"> ▪ You should have outbreak management plans outlining how you would operate if there were an outbreak in your school or local area. Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools 	<ul style="list-style-type: none"> ▪ Prepare an outbreak management plan. ▪ Review your plans against the DfE contingency framework. ▪ Have plans in place for high quality remote provision of education. ▪ Consider how bubbles, wearing of face coverings, and other social distancing 	<ul style="list-style-type: none"> ▪ In the event of an outbreak, advice will be sought and implemented from DfE, PHE, Surrey and the Bourne Education Trust. ▪ Contingency plan is in place to return to summer 2021 			

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<p>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.</p> <ul style="list-style-type: none"> ▪ 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) and PHE 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 outbreak management responsibilities. 	<p>measures could be reintroduced if they were required.</p> <ul style="list-style-type: none"> ▪ Consider how testing may need to be increased if an onus is placed on schools to manage this. ▪ Ensure key staff understand the escalation process to get further public health advice via the DfE helpline. 	<p>arrangements if required – ie. bubbles, face coverings, segregated play and lunch breaks.</p> <ul style="list-style-type: none"> ▪ Remote learning plan is in place. ▪ SLT are clear about how to escalate and obtain further advice. ▪ In the event of an outbreak, the contingency framework will be considered and increased measures may be put in place eg. learning outside. 			