1.0 Date of assessment:	:	2.0 Assessed by (job title / name):					
11/01/2021		MRS A.M.Charlton HEAD of TEACHING and LEARNING Mr P Hankey HEADTEACHER					
2.1 Ref number:		2.2 – Other personnel involved with assessment:					
 OCC considerations for returning to school 2 Government updates re Partial Reopening of Schools Jan 2021 Government Guidelines for full reopening of schools 08.03.2021 							
2.3 Address / site:		TETSWORTH PRIMARY SCHOOL					
3.0 Activity to be assessed (or scenario):							
STAFFING • Risk of infection • Workload/well-be	ing						
4.0 Identification of those at risk:	1) CLINICALLY VULNERABLE ST	TAFF 4.1 Line manager / class teacher (if					
	2) STAFF	appropriate)					
	3) CHILDREN						
	4) VISITORS/CONTRACTORS						
	5)SCHOOL ROTAS						
5.0 Harm / hazards which could or has occurred to those at risk (include detail	A) RISK OF INFECTION OF CLINICALLY EXTREMELY VULNERABLE STAFF AND CLINICALLY VULNERABLE STAFF						

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regarding activity at the time) B) RISK OF INFECTION OF STAFF GENERALLY								
	C) DEALING WITH A COVID-19 SYMPTOMATIC CHILD/INTIMATE CARE							
	D) UNAVAILABILTY OF TEACHING STAFF FOR A BUBBLE							
	E) STAFF WORKLOAD AND WELL-BEING – INCLUDING WORK ROTAS							
6.0 What have you already (detail via bullet points)	y done to control those risks and have those controls worked?	7.0 What else should you do to control those risks – who is responsible and when by?						
CLINICALLY VULNERABL A i) Staff who are Clinically	ELINICALLY EXTREMELY VULNERABLE STAFF and LE STAFF Extremely Vulnerable must only work from home unless guidance	Ai) NB CEV category has widened-more complicated process using formula of different factors, must be if you've been written to by Government. Government advice has changed around pregnant workers – over 28 weeks, 3 rd trimester, these staff should work from home.						
for this group changes. Shielding measures will app	oly until at least 31/03/2021							
Communication arrangement support the working of the s	nts are in place with those staff and their role in continuing to school is clear.	All staff asked to notify A.Ch if they receive a letter advising them to shield						
		Staff members who receive a shielding letter can only return to work if their GP/medical consultant confirms that they are no longer on the Shielded Patient List and can be removed from the national list. Until they have this letter then the school/staff member must continue to follow the guidelines for schools https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak						
Aii) Staff who are Clinically necessary adjustments mad	Vulnerable to have their Risk Assessments reviewed and have any de							
Aii) Clinically vulnerable sta	aff and staff who were shielding clinically vulnerable family members							

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no longer required to shield. PPE available for any staff member who wishes to use it.

Aiii) Return to work meeting offered to staff members anxious about returning to work to discuss safety measures in place.

RISK OF INFECTION OF STAFF GENERALLY

- **Bi)** Wearing a face covering or face mask **in the classroom in Primary Schools** or other education settings is not recommended but staff should plan activities to keep themselves as socially distant as practically possible when working within BUBBLES
- **Bii)** Staff to wear face coverings in shared spaces if there are other people there who they are not in contact with during the working day
- **Biii)** Staff to adhere to the 2 metre social distancing restriction with other adults in the school (and pupils where possible)
- Biv) Strict adherence to the limit of numbers in confined spaces such as the staffroom/office
- **B v)** Additional spaces such as the medical area/intervention spaces can be used at break times but must be thoroughly cleaned after use.
- Bvi) Equipment must be wiped after use pfotocopier/guillotine/kettle handles/phones etc
- Bvii) Within the classroom loud voices/loud chanting or singing will not be allowed
- **Bviii)** Pupils will be discouraged from touching surfaces/each other/adults whoare working with them
- B ix) Twice weekly Lateral Flow Tests have been introduced for all staff

B Vii) See Curriculum Section in the Government Guidance - file:///C:/Documents/2020%202021/Co-vid%2019/DfE%20and%20Gov%20Guidance/TERM%204%20Schools_coronavirus_operational_guidance.pdf

B ix) See separate Lateral Flow Risk Assessment for procedures and systems to e used.

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DEALING WITH A COVID-19 SYMPTOMATIC CHILD/INTIMATE CARE

Ci) Area of Class 2 Classroom room as medical area – symptomatic children waiting collection to be supervised in here

(Cii) Area to be closed off using room divider

C(ii) Warning system to alert staff that room is being used for medical purposes (so **MUST NOT** be used until room is clear and has been cleaned in accordance with Government Guidelines).

C(iii) Areas symptomatic child has been to be then to be cleaned by KS in in accordance with GOV cleaning guidance

https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings

Civ) children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way

C(v) If a child/ staff member becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn

C(iv) Ensure the child/staff member isolates at home for 10 days from start of their symptoms. The rest of their must isolate household for 10 days from the start of the infected persons symptoms and/or the date on which they were tested for Covid 19

C(V) Any siblings of cases also in the same setting (but a different, unaffected area) would need to isolate at this point.

C(v) Anyone with symptoms to be tested (online link nhs.uk/coronavirus) and must make the

C) PHE Covid 19 flow chart version 4.1 to be on display in the office/staffroom/medical area

Parents have received a copy of the Covid 19 flow chart version 4.1 in the Autumn 1 Newsletter

MARCH 2021 - parents to be sent latest PH Flow Chart

The DfE guidance 'Action list: dealing with a symptomatic children' was updated 22nd October.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/928841/Symptomatic children action list SCHOOLS FINAL 22-10.pdf

https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings

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school aware of the test result.

C(vi) In the event of a confirmed case The Local Authority will be contacted via e-mail:

<u>Educationcovid19@Oxfordshire.gov.uk.</u> providing a direct phone number, so that the team can answer/ask any queries. The team will contain both School Improvement and Public Health colleagues.

To contact the DfE Helpline:

Email: dfe.coronavirushelpline@education.gov.uk

Telephone: 0800 046 8687 (choose option 1 to notify of a case) Helpline opening hours: Monday to Friday from 8am to 6pm (plus Saturday-Sunday 10am6pm for advice about cases or other COVID-19 related issues)

If any of the following criteria are met, contact the SE HPT:

- ≥ 10% of a bubble is cases within 14 days
- ≥ 10% of staff are cases within 14 days
- ≥ 3 bubbles are cases
- There have been any hospitalisations

South East HPT email: Thames Valley HPT ICC.TVPHEC@phe.gov.uk

UNAVAILABILTY OF TEACHING STAFF FOR A BUBBLE

Di) Contingency staffing – use of T.A.s /part-time teachers where possible. Use of CLASS ACT supply agency if needed.

STAFF WORKLOAD AND WELL-BEING

Ei) 15th – 17th July was reserved for teachers to prepare for full opening in September

E(ii) September Inset days − 1 ½ days for planning and preparation

E(iii) September inset days to include safeguarding procedures to refresh training

E(iv) Visitors/contractors/volunteers to enter school/office by appointment only. PPE to be							
made available to offer staff protection	made available to offer staff protection						
E (v) No more than 1 household/ 1 volunteer/ 1 compar psychologist, O.T. etc) allowed on site at any one time.							
E(v) Meetings where multiple people are to take part to present time							
E Viii) Weekly staff meetings via TEAMS or ZOOM to take place if possible without adding additional workload expectations							
7.1 What is the level of risk after all controls possible have been put in place?	Risk of spread of infection is reduced by implementation of these measures.						
(HIGH/MED/LOW)							
8.0 Is this a safeguarding risk – if so, please							
describe:							
9.0 Additional notes as required:							
10.0 This risk assessment will be communicated	All staff – shared drive on School Network – email – staff meetings with teacher, TA, office,						
to – and how – and when:	premises, lunch groups						
11.0 Risk Assessment signed off by (job title / name and signature):							
12.0 Date of assessment sign off:	22.06.2020						
	22.00.2020						
13.0 Review dates:	Reviewed by staff	Reviewed by sta	aff	Reviewed 03.03.2021			
	19.10.2020	11.01.2021		For reopening			
	DfE update added	(highlighted)		08.03.2021			
	28.10.2020						
	(Highlighted)			Some highlighted			
				areas from previous			
				reviews removed			

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