

MANAGEMENT RISK ASSESSMENT

Department:	Activity:	Assessor's Name:	Assessment Date:	Associated paperwork:
All Teaching and support staff	Fully Open Provision during Lockdown	Jay Blundell	05/11/2020 Review: 08/01/2021	Safeguarding and Child Protection Policy Home School Transport Policy & Risk Assessment Health & Safety Policy Relationships Policy

The Covid-19 virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing. The virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).

Resuscitation Council UK Statement:

It is likely that a child having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.

STEP 1	STEP 2	STEP 3	STEP 4		STEP 5		STEP 6					
What are the hazards?	Who might be harmed and how?	What control measures are already in place?	Likelihood	Severity	Risk Score	Risk Band	What other control measures might be necessary?	Action by whom?	Action by when?	Action Reviewed		
<p>Exposure to COVID-19 (Overall & Environment)</p> <ul style="list-style-type: none"> ➤ Government advice not being regularly accessed, assessed, recorded and applied ➤ Social Distancing (SD) and other hygiene rules not being communicated, understood and applied ➤ Changes not being regularly communicated to staff, students, parents and MC 	<p>Staff, students & visitors:</p> <p>Site related transmission may occur: Through close contact between colleagues, students and visitors and touching contaminated surfaces.</p>	<p>Sources circulated to SLT for review and discussion. ASCL advice prioritised. Anyone feeling unwell or has someone in their household who is unwell informed not to attend school. Temperature testing takes place in any cases of uncertain student/staff health SLT conduct dynamic risk assessment daily of all people on site. Social distancing maintained wherever possible between all adults on site and between student groups. Frequent handwashing promoted for all. Hand sanitiser available in classrooms, shared spaces, at entrance/exit points</p>	3	x	3	=	9	M	<p>Review individual risk assessments carried out for staff at higher risk.</p> <p>Review temperature testing options</p> <p>Review cleaning schedules including frequency & monitoring of toilet cubicle & staff room cleaning.</p> <p>Consider employing a cleaner</p> <p>Review bins on site: consider replacing with foot operated; frequency of emptying.</p> <p>Review evacuation procedures - ensure they are not compromised</p>	JB SLT	Now	14/12/ 2020

<ul style="list-style-type: none"> ➤ Insufficient supplies of hygiene materials ➤ Access to school not being controlled effectively and visitor (if allowed) details recorded ➤ Contingency plans not in place for the transition to full opening or re-closing as required ➤ Are all the risks identified properly mitigated and regularly re-assessed? 		<p>Frequent cleaning of surfaces furniture and handles that students and/or staff touch using the fogger.</p> <p>Frequent cleaning of all communal areas (Reception, Offices, toilets, staff room, Hall) using the fogger</p> <p>Frequent = before and between each lesson, daily.</p> <p>Antibacterial spray, blue roll, tissues hand sanitiser and bins available in all rooms and large spaces.</p> <p>Bins emptied daily.</p> <p>Staff, parents and visitors informed of the measures in place to reduce transmission.</p> <p>Timetable and use of classrooms reviewed to reduce movement around the building.</p> <p>Visitors on site limited to outside college hours wherever possible to minimise numbers on site at any time. All visitors are recorded and access to building controlled.</p> <p>Contact details of visitors are recorded for track & trace.</p> <p>National guidelines for test and trace will be followed.</p> <p>Signage used to promote hygiene and social distancing.</p> <p>Review and maintain stocks of soap, hand sanitiser, wipes, blue roll, tissues.</p> <p>Protocol document shared with staff</p>							<p>NOTE: in an emergency social distancing may not apply.</p> <p>Increase ventilation wherever possible without compromising safety of students or staff.</p> <p>Discuss transport arrangements with drivers and parents.</p> <p>Monitoring system in place to enable prompt contact and trace identifications and communications.</p> <p>Review protocols in relation to NHS app</p> <p>Upskill staff on bereavement support and resource external support ready for need</p>			
<p>Exposure to Covid-19 (Curriculum & activities)</p> <ul style="list-style-type: none"> ➤ Insufficient/inadequate precautions being used to keep shared teaching 	<p>Staff & students:</p> <p>Transmission may occur during learning activities and</p>	<p>Organising classrooms and other rooms used for learning to maintain space between seats and desks.</p> <p>Unnecessary items and those items hard to clean removed from classrooms and learning environments.</p>	3	x	3	=	9	M	<p>Review behaviour management plans and procedures and present to Management Committee for approval as necessary.</p> <p>.</p>	IT SLT	Now	14/12/20

<p>equipment and spaces hygienic</p> <ul style="list-style-type: none"> ➤ Learning spaces don't enable adherence to SD rules ➤ Unnecessary exposure to staff & other student ➤ Lack of clarity around SD rules ➤ No systems in place to deal with bereavements, trauma, anxiety, behavioural issues ➤ No systems in place to regularly check SD and hygiene rules are complied with ➤ Lack of ability to apply SD rules to routine activities 	<p>behaviour management. Transmission may occur through sharing spaces and equipment</p>	<p>Thorough cleaning of classrooms between sessions and at end of the day using the fogger Ventilation in the building maximised by opening windows, doors or using ventilation units. Classes split into groups of no more than 4 students with one teacher (and TA where needed). Outside space used for learning where possible. Where possible actions taken for behaviour management will not involve positive handling a student. Transport arrangements and protocols revised (see Home-School Transport Risk Assessment) Sharing of stationary and other equipment avoided where possible Practical lessons – equipment cleaned after use and environment cleaned between groups. UNO – hygiene measures before and after playing around a table 2m apart Lunch to be eaten in hall or outside Tables cleaned before & after lunch Preventing staff and student toilets from becoming crowded by managing numbers accessing them at any one time. Staggered use of staff rooms and offices to reduce contact with colleagues. Storerooms and cupboards accessed by one person at a time. Outdoor play equipment cleaned between use by different groups of students. Tasks organised so that the shared use and passing of work equipment is</p>					<p>Review use of teaching spaces to reduce surface contacts throughout the day. Breaks staggered to limit numbers in corridors and circulation routes and ease congestion in toilet & hand washing facilities. Develop blended learning potential Staff training on key issues Education plan for students on understanding Covid</p>			
--	--	--	--	--	--	--	---	--	--	--

		limited. Work equipment to be cleaned before and after use. Protocols document shared with parents, students and staff Covid-19 Risk assessments of all offsite facilities & venues, as well as the activity										
<p>Exposure to Covid-19 (Medical)</p> <ul style="list-style-type: none"> ➤ Insufficient first aid staff to deal with isolating suspect COVID-19 cases, beyond normal medical issues ➤ Medical policy, procedures and appropriate response not revised and shared ➤ No medical room ➤ Lack of availability of PPE and training for use and disposal ➤ Awareness of all pre-existing medical conditions ➤ Lack of accurate records: <ul style="list-style-type: none"> • who has tested positive for COVID-19 (for elimination purposes)? • who has come into contact with anyone tested positive to COVID-19 and when? • who has been sent home with COVID-19 symptoms (a cough, high temperature or loss of smell/taste)? • dialogue with those that have suffered from COVID-19 and / or are isolated at home? 	<p>Staff & students:</p> <p>Transmission may occur when providing personal or intimate care*, first aid or the administration of medicines</p> <p>* No current students require personal care.</p> <p>Staff:</p> <p>Transmission may occur when supervising students taken ill with symptoms of COVID-19 and need direct personal care until they return home</p>	<p>The majority of onsite staff are first aid trained. At least one First Aider will be clearly identified on the staffing plan should it be necessary to reduce staffing levels.</p> <p>Wash/sanitise hands before and after providing care or treating a casualty.</p> <p>Emergency pack of PPE provided: wear disposable gloves, disposable apron, fluid resistant surgical mask and eye protection where there is a risk of respiratory droplets splashing into the eyes due to repeated coughing or vomit.</p> <p>When performing CPR, phone an ambulance and use compression only CPR until the ambulance arrives.</p> <p>If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield where available.</p> <p>Room designated for isolation until a student can be taken home</p> <p>Increase ventilation in the designated room if possible.</p> <p>Use emergency PPE kit provided for supervising adult and driver:</p> <p>Minimum: face mask if a 2-metre distance cannot be maintained, but where contact with the student is needed: disposable gloves and disposable apron</p> <p>Staff administering medication to maintain 2m social distance if possible</p>	3	x	3	=	9	M	<p>Staff providing personal or intimate care or first aid instructed on the safe “donning and doffing” of PPE.</p> <p>Review personal care plans to assess PPE requirements based on individual circumstances.</p> <p>Review Assessment of First Aid Needs of staff and students</p> <p>Maintain stocks of PPE. Where this is not available contact Local Resilience Forum/WBC.</p> <p>Use SLT or first aider to supervise to reduce numbers of staff who need access to PPE.</p> <p>Review medication plans to assess PPE requirements (if any) for staff administering medication.</p> <p>Clear protocol on requirements for testing and follow up for self-isolation/quarantine as required (Following National Guidelines)</p>	NR SLT	Now	14/12/2020

		<p>SLT monitors all staff and student health matters.</p> <p>Clear directives re testing: testing for anyone displaying any Covid-19 related symptoms. Self-isolation for anyone who is living in the same household with or has been in close contact with a person who has tested positive. (Following National Guidelines)</p> <p>Retention of accurate records of Covid impact on absence etc</p>										
<p>Exposure to Covid-19 (Safeguarding)</p> <ul style="list-style-type: none"> ➤ Safeguarding, code or practice, and staff handbook policies are not updated, regularly reviewed and shared ➤ DSL not onsite when required and cannot be contacted ➤ Poor induction of new staff and students ➤ No guidance in the staff room use in terms of space, equipment, resources (kettles, biscuits etc) timings, SD and purpose ➤ Lack of CCTV monitoring ➤ Congestion at drop-off and pick-up times ➤ Lack of zoning markings 	<p>Staff, students & parents:</p> <p>Transmission may occur through face to face contact and through touching contaminated surfaces/objects</p>	<p>Always at least one Designated DSL present on site. If reduced staffing is necessary, DSL will be clearly indicated on staffing plan; identity and contact details are known to all.</p> <p>My Concern is used by staff for all issues and monitored daily by DSL</p> <p>Covid-19 Policy in place - covers medical responses, SD, teaching, socialising, feeding, wellbeing etc</p> <p>Safeguarding Policy is updated in keeping with WBC guidance on Covid-19</p> <p>Recruitment Policy is followed in the recruitment of any new staff. Virtual or out of hours tours and Teams meetings for interview are offered</p> <p>Induction for new students follows existing practice but where possible will take place out of hours to minimise exposure</p> <p>Parents wait outside to deliver and collect their child who is escorted in and out by a staff member.</p> <p>Staggered start not deemed necessary due to small numbers</p> <p>SD zoning is not considered helpful at FC</p>	3	x	3	=	9	M	<p>The need / benefit of SD zoning will be kept under review</p> <p>Social intercourse of parents at school gate will be monitored and guidance provided if necessary</p> <p>Refresh signage-to be noticed</p>	TS SLT	Now	14/12/20

		Safeguarding measures have been explored in full for Remote Learning (See Risk Assessment: Online Home Schooling)										
Exposure to Covid-19 (Staff, Students and Parents) <ul style="list-style-type: none"> ➤ Ineffective communication channels to staff, parents and students ➤ No robust feedback and reply system to ensure best practice and two-way communications for students, parents, staff and MC ➤ Lack of MC oversight of Covid-19 ➤ No follow up to breaches of SD, hygiene rules and lockdown. ➤ Lack of staff training to cope with the demands related to Covid-19 ➤ School transport and associated risks 	Staff, students & parents: Transmission may occur through face to face contact and poor observance of hygiene measures	SLT weekly meetings: review staffing, students' learning and wellbeing, safeguarding matters, engagement and wider issues Risk assessments completed and reviewed as required Staff briefings to update on protocols as required Staff training and coaching on Teams where necessary Letters home to update parents as required Useful support materials sent via schoolcomms and posted on website Regular meeting between HT and Chair of MC to review and discuss. Risk Assessments shared with staff and MC Phone calls home to parents to inform (+/-) and seek support as required (Eg: spitting) Home-school transport protocols agreed with drivers, communicated to parents Staff and students directed to use face coverings in communal areas and in the buses, but may use more extensively if they wish; they would provide their own	3	x	2	=	6		Consider asking parents to transport their child in the event the pupil refuses to wear face covering Review guidance on use of PPE in school and in school transport	JB SLT	Now	14/12/20

Step 7

Completing a Risk Assessment

Why are we doing this?	All employers are required to undertake risk assessments in order to assess what the School needs to do to comply with health and safety legislation. What is important is to identify risks and to act reasonably to eliminate or minimise this risk.
Who should be the assessor?	The assessor should be someone with experience and knowledge of the work activities in the school and the tasks that are under assessment and with training in risk assessment.
What is a hazard?	A hazard is anything with the potential to cause harm to a person or damage to property.
Who might be harmed?	This shows all those who may be affected by the activity or hazard, this may not just be school employees.
What control measures are already in place?	Existing controls cover reasonable measures already in place to reduce the overall risk, e.g. PAT, staff training, window restrictors
Likelihood	The allocation of this score looks at the chance of something happening and is based on the risk matrix below.
Severity	The allocation of this score looks at the severity of the injury should the hazard be realised and is based on the risk matrix
Risk	This score takes into account likelihood x severity and should be used to prioritise the level of risk, based on the risk matrix below, and set appropriate control measures.
What other control measures might be necessary?	Depending on the level of risk allocated against each task or activity, reasonable additional control measures may be required. The aim is to minimise the risk as much as possible.

Step 1	Identify the hazard/s, e.g. trailing leads, slips & trips, electricity, no staff training
Step 2	Write down who might be harmed by the listed hazard/s, e.g. students/staff/visitors
Step 3	Against each hazard, list what control measures are already in place to reduce the overall risks
Step 4	Calculate a total score to the likelihood and severity of each hazard. Refer to the risk rating matrix for guidance
Step 5	Based on the risk matrix, allocate a risk rating – High, Medium or Low. Refer to the risk banding matrix below for guidance
Step 6	Decide if any other control measures might be necessary to minimise the risk. Confirm who will ensure the additional actions are completed and by when. Whoever is responsible for the implementation should sign off these actions once complete
Step 7	The risk assessment should be signed off by the Headteacher and circulated to those involved with the activity. You should review your risk assessment annually or if you think it may no longer be valid, such as the introduction of new equipment or new work activities, or if there are any significant changes to the hazards.

Risk Assessment Risk Rating Matrix					
Severity	Likelihood				
	Improbable	Remote	Possible	Probable	Very likely
Accident or incident where no harm arises	1	2	3	4	5
Minor injury	2	3	6	8	10
Injury resulting in more than 7 days off work	3	6	9	12	15
Major injury	4	8	12	18	20
Fatality	5	10	15	20	25

Risk Banding Matrix & Action Guidance		
Level of risk	Action and timescale	
15-25	HIGH	You should not start work until the risk has been reduced. You may have to set aside resources to reduce the risk. If the risk involves work in progress, you should take urgent action. If it is not possible to reduce the risk, even with significant resources, the work must be stopped.
8-12	MEDIUM	You should seek to ensure that the risk is reduced as low as reasonably practicable by introducing further risk control measures within a reasonable timescale
1-6	LOW	You do not need to take further action at this time by introducing additional measures. Monitoring is necessary to make sure that the controls are still effective and being used by those involved

