



Dartmoor
MULTI ACADEMY TRUST

Establishment name
Bradford Primary School
Black Torrington P



Initial Assessment

Review

Following Incident

Date of Initial Assessment:

Assessment Date: Review

Assessor

Activity / Task / Process / Equipment

COVID-19 2021

(NB Other risk assessment findings and policy arrangements apply where unaffected by COVID-19)

Summary of changes:

- All changes in
- Twice weekly start of LEED of September
- No requirement for consistent bubbles
- Assemblies can resume - at school discretion (must ensure ventilation and RA on space being used must be undertaken or consideration face masks if close contact.)
- No need for alternative lunchtime arrangements
- No requirement to undertake contact tracing
- Under-4s, irrespective of their vaccination status, are to be offered a vaccine. If they have a positive case, they will be offered a PCR test and, if positive, will

Summary of hierarchy of controls:

- Ongoing twice weekly staff asymptomatic LFD testing
- Face covering in circulation spaces and common areas for all
- Monitor and isolate – an individual who has symptoms or arrangements, cooperation
- Continue to protect the vulnerable – high level of protection for all
- Regular and repeated hand washing/sanitising: on arrival, before
- Good respiratory hygiene practice
- Twice daily cleaning with disinfectant on surfaces (see attached Cleaning document)
- Limit sharing of personal equipment such as earphones, equipment, etc. to identify compensatory measures
- PPE for selected staff who work in close contact with identified
- Face covering in school and staff
- School discipline: policy amended to state that for those who do

Significant hazard	Who / what at Risk?	Risk			Control measures in place
		L	S	R	
<p>Essential premise Potential for contracting COVID-19 via direct or indirect contact with someone displaying symptoms</p>	<p>Staff / student</p>	<p>>1</p>	<p>5</p>	<p>>5</p>	<p>Essential site maintenance should continue as normal Contractors entering site will do so by appointment and will abide by hygiene controls</p>
<p>Staff or students Potential for contracting COVID-19 via direct or indirect contact with someone displaying symptoms</p>	<p>Staff / students with symptoms</p>				<ul style="list-style-type: none"> ▪ No staff or students to attend if they are symptomatic. Those who display symptoms of one or more of the following: <ul style="list-style-type: none"> ○ New and continuous cough ○ high temp >37.8 ○ loss/change to sense of smell/taste <p>must return home as soon as possible and are must undertake a PCR test to authorise any absence</p> • 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. ▪ Contact-free thermometer available if needed. ▪ Those displaying symptoms are to cover their mouth/nose with a tissue or paper towel until they can leave. ▪ Stocks of tissue, hand-sanitiser and cleaner-sanitiser to be located in this room. PPE also to be on hand for use by staff assisting this person <i>if this is unavoidable</i> (see First Aid section).

					<ul style="list-style-type: none"> ▪ The room must then be cleaned in line with previously circulated guidance. ▪ If visual contamination is evident in the room e.g. saliva on table surfaces etc then PPE in the form of gloves, apron, and respirator to be worn for cleaning. Contaminated area to be pre-treated with Titan sanitiser. ▪ Flow chart (v.15.0) from PHE SW to be followed in respect of any person who has tested positive. DfE phone number to be used as initial point of contact. ▪ Actions on flow chart followed depending on test result. If negative, staff or student can return to school Positive test result would be communicated to DfE helpline (0800 046 8687). ▪ Other reasons to report direct to HPT are: <ul style="list-style-type: none"> ○ Hospital admission with COVID like symptoms ○ You think you may need to close due to numbers affected ○ Someone in setting has been admitted to hospital ○ You are getting significant media interest • If escalated to HPT at PHE SW, all instruction received from the HPT would be followed.
<p>I n c r e a s e s i n n u m b e r s i n s c h o o l</p> <p>For settings testing pupils, students and staff in asymptomatic test sites after the summer holidays, this section <u>only applies after the initial two tests are complete. Cases identified in the test-on-return period should not trigger extra measures or escalation to the DfE helpline.</u></p> <p>Whichever of these</p>	<p>S t a f f , s t u d e n t s</p>	<p>6</p>	<p>6</p>	<p>6</p>	<ul style="list-style-type: none"> • Contingency Plan to be developed to respond to increase in number of cases in school which must detail <ul style="list-style-type: none"> ○ roles and responsibilities ○ actions you would take to put it in place quickly e.g additional testing measures, reintroduction of face coverings (exl primary school), shielding or other measures, attendance restrictions in extreme cases on advice of DfE ○ educational continuity: how you would ensure every child receives quantity and quality of education and support to which they are normally entitled ○ how you would communicate changes to all stakeholders

<p>reached first:</p> <ul style="list-style-type: none"> • 5 children, pupil staff, who are mixed closely, with COVID-19 within a period; • 10% of children, or staff who are mixed closely with COVID-19 within a period; 					<ul style="list-style-type: none"> • Identifying a group that is likely to have mixed closely will be different for each setting. For schools, this form group or subject class break times • a sports-school activity • Refer to Annex in Contingency framework for guidance. • Ensure you have read the DfE guidance on Contingency framework Contingency framework: education and childcare settings (publishing.service.gov.uk) • Review and reinforce the testing, hygiene and ventilation measures they already have in place. • Seek additional public health advice if concerned about transmission in the setting (DfE helpline (0800 046 8687, option 1)) • Employers should call the Self-Isolation Service Hub on 020 3743 6715 as soon as they are made aware that any of their workers have tested positive
<p>Asymptomatic transmission</p> <p>Potential for contracting COVID via direct contact with someone NOT displaying symptoms</p>	<p>Serious, but not life threatening</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> ▪ Twice-weekly testing for all staff by undertaking LFD test on rotational basis, at 3-4 day interval. ▪ Separate risk assessment describes controls, consent process and training requirements for test operatives (various roles) for test venues. Risk assessment record follows format determined by NHS Track and Trace. ▪ Those testing positive will have to return home to isolate as soon as the notification has been received. They must arrange a full PCR test to confirm to ensure their absence is authorised. 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 they do not have COVID-19 symptoms.
<p>Shielding the vulnerable</p> <p>Potential for contracting COVID</p>	<p>Serious, but not life threatening</p> <p>habitants of staff/students</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • All clinically extremely vulnerable (CEV) children and young people should attend their education setting unless they are

<p>via direct or indirect attending school consequence.</p>					<p>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.</p> <ul style="list-style-type: none"> • Further information is available in the guidance on supporting pupils at school with medical conditions. • Risk assessments if in place for CEV/CV staff should be subject to ongoing review and updated if there are significant changes in individual circumstances or work patterns. <ul style="list-style-type: none"> ▪ Risk assessments should be in place for pupils with EHCP to identify additional control measures necessary to control the risks to the individual, their peers and the staff who work with them where determined necessary by the SENDCo. A format has been circulated for this purpose. ▪ This process should be led by the SENCO ▪ These risk assessments should be subject to ongoing review and updated if there are significant changes in individual circumstances. ▪ IHCP to be reviewed to ensure all students with medical needs can attend with all protective elements of plan in place.
<p>Social distancing Potential for contracting COVID via direct contact whilst attending school site</p>	<p>Staff students</p>	<p>1</p>	<p>1</p>		<ul style="list-style-type: none"> ▪ Not required
<p>Hygiene Potential for contracting COVID via indirect contact whilst attending school site</p>	<p>Staff, - adult inhabitants of</p>	<p>4</p>	<p>4</p>	<p>04</p>	<p><u>Hand-hygiene:</u></p> <ul style="list-style-type: none"> ▪ Ongoing regular hand-hygiene is the principal control for indirect transmission. ▪ Hand washing or hand sanitising with alcohol hand sanitiser must be undertaken at the following times: <ul style="list-style-type: none"> ○ Upon arrival at Tutor base at day's start ○ After using a washroom ○ Before and after food

					<ul style="list-style-type: none"> ○ <u>Upon entering and leaving any teaching space</u> ○ After coming in from outside recreation ○ Upon final departure ○ After removing PPE or a face covering <ul style="list-style-type: none"> ▪ <i>Therefore, hand- sanitiser must be available at the entrance/s to each teaching space and entrance/exit points.</i> ▪ Staff to undertake hand-h y g i e n e a f t e r h a n d l i n g p ▪ Hand hygiene should also be undertaken after use of any shared resource. ▪ Staff should supervise hand-sanitising in teaching spaces. ▪ All visitors must wash/sanitise their hands upon arrival and departure. <p><u>Respiratory hygiene:</u></p> <ul style="list-style-type: none"> ▪ Good respiratory hygiene – ‘ C a t c h i t , B i n i t , K i l followed and modelled as much as possible. ▪ Tissues and covered bins to be provided in each room. ▪ <i>Behaviours to be taught and modelled at all ages.</i> ▪ Regular checks of washrooms must be undertaken to ensure that stocks of soap etc are available. ▪ Pupil access to washrooms to be controlled to limit numbers as well as to control behaviour. Year groups have been allocated a set of toilets to use throughout the day in their tutor hubs. Toilets will be checked and cleaned throughout the day and students expected to hand sanitise before and after using the toilet. ▪ Message to be reinforced by posters displayed around the site. ▪ Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers. This should be considered in student specific risk assessments in order to support these pupils and the staff working with them. <p><u>Cleaning:</u></p> <ul style="list-style-type: none"> ▪ All rooms utilised in the timetable should be cleaned at least daily.
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<p>F i r s t A i d</p> <p>P o t e n t i a l f o r c o n t r a c t i n g C O V I D f r o m r e c t d i a n e d t i n c o n t a c t w i t h c h i l d d u e t o a d m i n i s t r a t i o n o f F i r s t A i d</p>	<p>F i r s t A i d</p>	<p>s t a f f</p>	<p>4</p>	<ul style="list-style-type: none"> ▪ No Covid specific measures for non Covid related First Aid other than normally practiced. ▪ If people report to First Aid with COVID-19 symptoms, beyond testing temperature if needed, they should NOT be treated by First Aid but should be shown to a separate isolation room where they can be isolated until they return home. They should be required to cover their mouths with a tissue/paper towel until this happens. ▪ A contactless thermometer is available to take a temperature. PPE will nevertheless be worn as described above. 	

					<ul style="list-style-type: none"> ▪ Have a room set aside for this eventuality and have a supply of tissues/paper towels on hand. <p><u>PPE – please note:</u></p> <ul style="list-style-type: none"> ▪ PPE for the purposes of infection control in the form of gloves, face masks/respirators and face shields must be used with caution as cross contamination of the virus can occur with PPE. ▪ If disposable gloves are worn, change them frequently by removing them from the wrist and continue to wash your hands. ▪ PPE face masks/respirators must be removed by the ear pieces/ties. Face shields by the back of the securing band. In all cases avoid touching the front of the mask/shield which could be contaminated. ▪ Always wash your hands after removing PPE ▪ <i>PPE can be a flawed control measure if used incorrectly. It relies on good fit and correct usage. It can itself become contaminated. Do not let wearing PPE lull you into a false sense of security and avoid prolonged close, face to face contact as the control measure of first choice.</i> ▪ Briefing document for safe use of PPE circulated. <p style="text-align: center;">○</p>
<p>Lack of ventilation</p> <p>Potential for infection via direct contact ventilation</p>	<p>Staff, -adults habitants of classrooms due to poor</p>		4	c	<ul style="list-style-type: none"> ▪ Ensure rooms are well ventilated by opening windows and that a comfortable teaching environment is maintained. You should balance the need for increased ventilation while maintaining a comfortable temperature. ▪ 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.

					<ul style="list-style-type: none"> ▪ Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist 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). ▪ Air handling units and other mechanical ventilation systems should be used if the school has these. It should be ensured that these systems are <u>not</u> set to air re-circulation only. ▪ Re-circulating only air-conditioning systems not to be used in place of open windows and fresh air ventilation but can be used where a source of fresh air is provided. ▪ Source of fresh air to be maintained in winter months when weather is colder whilst maintaining statutory minimum temperatures by: <ul style="list-style-type: none"> ○ Open all windows by a small amount ○ Opening doors to aid cross-ventilation (subject to controls for fire doors above) ○ ‘ Flush ’ rooms at break t i fullest extent for 2 minutes. ○ Allow pupils to wear jumpers/hoodies/coats.
<p>Cleaning tasks</p> <p>Potential for indirect contracting COVID-19 whilst undertaking cleaning</p>	Cleaning staff	4	4	<ul style="list-style-type: none"> ▪ See separate cleaning guidance and associated risk assessments. ▪ Cleaners’ PPE to be disposable or laundered aprons. ▪ FFP2/FFP3/N95 respirators are for direct contact (within 2m for >15minutes) with an individual who is displaying symptoms so should NOT normally be required for these tasks – refer to cleaning guidance. See exception below. ▪ If not disposable, laundered aprons should be washed on the hottest wash possible for the clothing concerned ▪ Removed PPE to be double-bagged for disposal. ▪ A disinfectant/cleaner (either combined or separate) to be used. Ensure that this has a confirmed viricidal action. 	

					<ul style="list-style-type: none"> ▪ Usual COSHH risk assessment findings to be followed in respect of chemical safety and use. ▪ Please refer to Cleaning Guidance for full details of cleaning methodology plus a <i>suggested</i> example cleaner/disinfectant. ▪ Launder cloths daily or use disposable paper rolls. ▪ All staff to follow policy on daily cleaning of all hard surfaces. ▪ Unnecessary paperwork and displays to be removed to allow surfaces to be sanitised. ▪ Cleaning of isolation room: if visual contamination is evident in the room e.g. saliva on table surfaces etc then PPE in the form of gloves, apron, and respirator to be worn for clean. Contaminated area to be pre-treated with Titan sanitiser.
<p>T r a n s p o r t</p> <p>Potential for direct and/or indirect contracting by which COVID-19 is spread during cleaning</p>	Students	2	3	6	<ul style="list-style-type: none"> ▪ The Trust is not the principal duty holder in respect of transport, organised by others. The strategy will therefore be to cooperate with and communicate the risk assessment findings of other partner organisations as well as reinforcing and communicating government guidance for the safe use of general public transport. ▪ DCC Transport Coordination Service risk control measures to apply. ▪ In line with government guidance for public transport and dedicated school transport, students will be required to wear a face-covering* ▪ Any child, young person or other learner who starts displaying coronavirus symptoms while at their setting should wherever possible be collected by a member of their family or household. ▪ Transport provider to clean regularly touched hard surfaces between uses. ▪ All passengers alighting from a bus should sanitise hands as soon as possible. Similarly, transport users should sanitise hands before leaving the building to board the bus.

					<p><i>*PPE protects the individual from the virus. A face-covering offers little protection to the individual but it will protect others <u>from</u> the individual by limiting the travel of their breath or cough/sneezes. See separate guidance on use of face-coverings.</i></p>
School: Trip of c		1	3	3	<ul style="list-style-type: none"> ▪ Ensure that any new bookings have adequate financial protection in place. ▪ 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. Ensure contingency plans in place to account for changes. ▪ 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).