

<p>Exposure to COVID-19</p> <p>The 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).</p>	<p>(cont) Everyone on site.</p> <p>General transmission may occur: Through close contact between colleagues, pupils and visitors and touching contaminated surfaces.</p>	<p>for Maths and English for the first four weeks. This will then be reviewed in line with guidance.</p> <ul style="list-style-type: none"> ● Social distancing maintained wherever possible between all adults on site, pupils and staff and between class bubbles. ● Frequent handwashing promoted. ● Hand sanitiser available in classrooms, shared spaces and entrance and exit points. ● Good respiratory hygiene encouraged by promotion of 'catch it, bin it, kill it' approach. ● Enhanced cleaning of frequently touched surfaces. ● Cleaners will wear gloves and any other PPE identified as essential for their work ● All staff will take responsibility for maintaining high standards of tidiness and cleanliness ● Anti-virus sprays and disposable cloths will be provided to each classroom ● Hand sanitiser will be available in each classroom and regular use encouraged. ● Disposable tissues available in classrooms. ● Bins for tissues emptied during the day. ● Staff, parents and visitors informed of the measures in place to reduce transmission. ● BAME and other vulnerable staff reassured that all school staff have been briefed to keep at least a 2m distance between adults and adults and away from pupils wherever possible. ● Circulation routes in buildings communicated appropriately to staff and pupils. ● Timetable and use of classrooms reviewed to reduce movement around the building. ● Where possible, accessing rooms from outside. ● Organising classrooms and other rooms used for learning to support distancing i.e. seating pupils side by side and facing forwards. 		<p>sanitiser and cleaning materials.</p> <ul style="list-style-type: none"> ● Review cleaning schedules to include more frequent cleaning of rooms/shared areas used by different groups. ● Signage used to promote hygiene and social distancing. ● Consider signage with different languages if needed? ● Review stocks of soap, hand sanitiser and number of hand sanitiser stations, tissues. ● Consider if skin friendly skin cleaning wipes are needed for younger children and pupils with complex needs. ● Review bins consider replacing with foot operated. ● Risk assessment to be published on school website. ● Review fire safety procedures to ensure that any measures put in place do not compromise evacuation routes. ● Ensure pupil groups and social distancing maintained during fire drills. <p>NOTE: in an emergency social distancing may not apply.</p>	<p>26.8.20</p> <p>Inset day</p> <p>24.8.20</p> <p>July 2020</p> <p>Inset day</p> <p>w/c 7.9.20</p>	
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<p>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).</p> <p>Exposure to COVID-19</p> <p>The 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</p>	<p>Through close contact between colleagues, pupils and visitors and touching contaminated surfaces.</p> <p>(cont) Everyone on site.</p> <p>General transmission may occur: Through close contact between colleagues, pupils and visitors and touching</p>	<ul style="list-style-type: none"> • Unnecessary items and those items hard to clean removed from classrooms and learning environments. • Ventilation in the building maximised by opening windows and doors. • Visitors on site limited and access to building controlled. • Individual risk assessments will be in place for vulnerable staff. • Stand down cleaning hours will be used to ensure the entire site has been cleaned thoroughly. • Contractors delivering services using school facilities, such as catering asked to provide copies of their risk assessment. • Staff and pupils only bring essential equipment into school. • Thorough cleaning of rooms at end of the day. • Specific Risk Assessments will be undertaken for each class, as each have specific needs. • Activities will be individual wherever possible; group work will not take place unless a specific risk assessment shows that this can be managed safely • Doors should be left open where possible to encourage ventilation and to avoid the need to touch door handles • With permission from the BAME and other vulnerable staff, they are made known to all other staff so they might take more care to prevent transmission 		<ul style="list-style-type: none"> • Ensure increased ventilation measures do not compromise pupil or staff safety. • Review access points for visitors. • Arrange times that visitors, suppliers, contractors, external partners are on site to minimise numbers on site at any one time. • Minimise visitors to site by using virtual meetings where possible. 	<p>July 2020</p> <p>Ongoing</p>	
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<p>Exposure to COVID-19</p> <p>The 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</p>	<p>Staff and pupils.</p> <p>Transmission may occur when providing personal or intimate care</p>	<ul style="list-style-type: none"> • PPE provided (such as disposable gloves, disposable apron, mask, visor) • Hand washing after providing care. • BAME and other vulnerable staff find another adult, if possible, to deal with this • BAME and other vulnerable staff given 'PPE pack' to carry round with them 	<p>H</p>	<p>Staff using PPE instructed on the safe "donning and doffing" of PPE. Review personal care plans to assess PPE needs based on individual circumstances.</p>		<p>When complete M</p>
	<p>Staff and casualty.</p>	<ul style="list-style-type: none"> • Wash/sanitise hands before and after treating a casualty. 	<p>H</p>	<ul style="list-style-type: none"> • Review Assessment of First Aid Needs. 		<p>When complete M</p>

<p>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).</p>	<p>Transmission may occur when providing First Aid</p>	<ul style="list-style-type: none"> Wear PPE provided (such as disposable gloves, disposable apron, mask, visor). When directly treating people with symptoms of COVID-19 a fluid repellent surgical mask should be worn and eye protection may be needed where there is a risk of fluids entering the eyes due to repeated coughing, spitting or vomiting. When performing CPR phone an ambulance and use compression only CPR until the ambulance arrives. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield where available. BAME and other vulnerable staff find another member of staff to deal with this, if possible. 		<ul style="list-style-type: none"> First aiders instructed on the safe “donning and doffing” of PPE. Maintain stocks of PPE. Where this is not available contact LA. List of LA PPE suppliers communicated to schools. PPE Exchange can be used to help with finding a supplier. https://www.ppeexchange.co.uk/ 		
<p>Exposure to COVID-19</p>	<p>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.</p>					
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		<ul style="list-style-type: none"> • PPE provided for supervising adult: • Fluid resistant surgical mask if a 2-metre distance cannot be maintained. • Where contact with the pupil is needed: Fluid resistant surgical mask, disposable gloves and disposable apron. • BAME and other vulnerable staff find another member of staff to deal with this, if possible. 			
	Staff and pupil. Transmission may occur when staff administer medicines or supervise pupils who self-administer.	<ul style="list-style-type: none"> • Supervising staff to maintain 2m social distance. 	H	<ul style="list-style-type: none"> • Review medication plans to assess PPE requirements (if any) for staff administering medication. 	When complete M
	Social distancing and cross contamination when collecting/ eating lunch	<ul style="list-style-type: none"> • EYFS, KS1 and Y3 classes will eat their lunches in the main hall and the new hall with the exception of Year 4, 5 and 6 will eat in their classrooms. • The children will be in the halls two bubbles at a time on a strict timetable. • Children will all be seated side by side, not opposite to one another. • There will be a 15 minute break between bubbles leaving and entering the halls for cleaning. • Cooked meals will be served to children in a disposable box. • Mellors staff have been instructed not to serve front of house. • Parents of juniors who choose to have packed lunches will be asked to provide children with food that the children can access themselves (ie no packaging which needs scissors or adult help to open). 	H	<ul style="list-style-type: none"> • Organise rotas and brief lunchtime supervisors of their locations and roles. • Assess whether additional staff/ additional hours will be required to enforce the rota, cleaning and supervision. 	When complete M

	<p>Social distancing on playground at break and lunchtimes</p>	<ul style="list-style-type: none"> ● Each class group will have their own demarcated play area. ● Groups will be staggered on the playground ● Members of staff will occupy 'corridor' areas between the zones to supervise at break times. ● While it is challenging to achieve social distancing during play, children will be encouraged not to make actual physical contact (bearing in mind the age of the children). ● Equipment will not be shared between zones. ● Scientific advice is that transmission rates outside are low. 	<p>H</p>	<ul style="list-style-type: none"> ● Adjust number and size of zones ready for September ● Remark lines on field ● Ensure children know their zones and the rules on the first three days. 		<p>When complete M</p>
	<p>Cross contamination and social distancing in toilet areas</p>	<ul style="list-style-type: none"> ● Each class has a dedicated toilet area. Some classes will have to share toilet blocks. Here, children must go to the toilet one bubble at a time and teachers will operate rotas for lunch and break time hand washing. ● Children may also wash hands in the classroom sinks. ● Handwashing will be required regularly and after every visit to the toilet. Children will also gel hands before visiting the toilet. ● Toilet touchpoints will be disinfected in the middle of the day and during daily clean. 	<p>H</p>	<ul style="list-style-type: none"> ● Organise rotas for toilets used by more than one bubble. 	<p>When complete M</p>	
<p>Exposure to COVID-19 The 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.</p>	<p>Cross-contamination due to staff/child movement across classes</p>	<ul style="list-style-type: none"> ● One of the key principles in reducing transmission is keeping children in distinct learning groups. ● Where possible, they will stay in these groups at all times, in the same classroom and as often as possible, with the same teacher. In KS2 the children may be taught by different adults for PPA time. In this situation, the member of staff should ensure that they observe strict hygiene and social distancing rules. The adults will change 	<p>H</p>	<ul style="list-style-type: none"> ● Teaching children the rules of operating in a bubble on their first day back – write simple, easy to remember guidelines to make this clear for all. 		<p>When complete M</p>

<p>It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).</p>		<p>classrooms rather than the children. The classroom should remain well ventilated.</p> <ul style="list-style-type: none"> ● If a message needs to be given, this will be done from the doorway (therefore classroom doors should be kept open) ● Staff will be allowed to have a mobile phone in their classrooms – only to be used in the presence of children to seek help if required. Safeguarding rules regarding the appropriate use of mobile phones should continue to be observed. 				
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		<ul style="list-style-type: none"> • Sharing this document with everyone, including BAME and other vulnerable staff to show the risks have taken seriously • School inclusion officer's phone number made available to BAME and other vulnerable staff, if they do not already have it, to facilitate dialogue related to anxiety 				
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	<p>Potential for vulnerable families not sending children back to school</p>	<ul style="list-style-type: none"> • Ongoing safe and well checks will be undertaken and support provided for any vulnerable children still not being sent into school. School will work with Social Services to ensure children return as quickly as possible. 	H	<ul style="list-style-type: none"> • Most of these children are already back or working with other agencies. • Contact those few who have not returned towards the end of the holidays. 		When complete M
	<p>Vulnerable staff may be harmed if they cannot access their medication in the event of an emergency</p>	<ul style="list-style-type: none"> • All BAME and other vulnerable staff carry their medication with them at all times. If possible, this is named so it is clear to whom it belongs in the event of a medical emergency • Line managers are clear on what the protocol is for the identified medication in case the BAME and other vulnerable staff members are unable to administer this themselves. (If assistance is to be given to the BAME and other vulnerable staff member, the above guidance on assisting in a medical emergency shall be adhered to). 	H	<ul style="list-style-type: none"> • BAME and other vulnerable staff members carry medication with them at all times • Line managers speak to BAME and other vulnerable staff members so they are clear who has which needs 		When complete M

4. Tick (✓) if any of the identified hazards relate to any of the following specific themes:

Hazardous Substance	Manual Handling	Display Screen Equip	Fire	Work Equip / Machinery	Stress	Individual Person such as Young Person New/ Expectant Mother or Service User
					<input type="checkbox"/>	<input type="checkbox"/>

If any are ticked a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

5. Risk Rating

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

Risk Rating	Description	Action Priority
High	Where harm is certain or near certain to occur and/or major injury or ill-health could result	Urgent action
Medium	Where harm is possible to occur and/or serious injury could result e.g. off work for over 3 days	Medium priority
Low	Where harm is unlikely or seldom to occur and/or minor injury could result e.g. cuts, bruises, strain	No action or low priority action

6. Assessment

Signature of Assessor(s):
Print Name: Elaine Curtis

Signature of Line Manager:
Print Name:

Date Assessed: July 2020. Reviewed 26.8.2020

Review Date: 3.9.2020

7. Communication and Review

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed annually or following a significant change, accident or violent incident.