

Full Attendance from April 1st 2021 - Schools Covid-19 Risk Assessment v002.1 29/03/2021



The purpose of this risk assessment is to address the additional risk of the transmission of Covid-19 infection as schools welcome pupils back to school on March 8th 2021. It should be updated in line with guidance from the UK Government:

<https://www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings>
Actions for schools during the coronavirus outbreak - GOV.UK (www.gov.uk)

This is a generic risk assessment, which should be built upon to suit individual schools. All actions should be immediate and reviewed in line with guidance updates.

All other policies, procedures or risk assessments which will be impacted by the response to Covid-19 (e.g. fire safety, mental health and wellbeing for pupils and staff, lockdown, behaviour policy etc.) should be reviewed also.

Adults includes staff who work at the setting, visiting staff, contractors, parents, volunteers and essential maintenance workers. Visitors should be only those necessary for the safe operation of the establishment.

Title / Activity: Newfield School

Date completed: 9th July 2020 updated 1st April 2021

Completed by: Newfield Senior Leadership Team

The “system of control” which should be at the heart of how the school operates is in two parts and is as follows:

Prevention

You must always

- 1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school;
- 2) Ensure face coverings are used in recommended circumstances (see 3.1);
- 3) Ensure everyone is advised to clean their hands thoroughly and more often than usual
- 4) Ensure good respiratory hygiene for everyone by promoting the ‘catch it, bin it, kill it’ approach;
- 5) Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents;
- 6) Consider how to minimise contact across the site and maintain social distancing wherever possible;
- 7) Keep occupied spaces well ventilated (see sections 3.3 and 3.4);

In specific circumstances:

- 8) Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary;
- 9) Promote and engage in asymptomatic testing, where available;

Response to any infection

You must always:

- 10) Promote and engage with the NHS Test and Trace process;
- 11) Manage and report confirmed cases of coronavirus (COVID-19) amongst the school community (see section 8);
- 12) Contain any outbreak by following local health protection team advice (see section 9);

Prevention

What is the hazard?	Who might be harmed?		What are you doing about it?	RAG	Comment	Complete?
	Pupils	Adults				
1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school	X	X	Inform and remind all members of the school community that they must stay at home if: <ul style="list-style-type: none"> • they have one or more coronavirus (COVID-19) symptoms; • a member of their household (including someone in their support bubble or childcare bubble if they have one) has coronavirus (COVID-19) symptoms; • they are required to quarantine having recently visited countries outside the Common Travel Area; 		Posters to be displayed Letters sent to families Reminders to staff through weekly briefings and emails	✓
	X	X				

<p>Reference to PPE means:</p> <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). <p>The PPE that should be used when caring for someone with symptoms of coronavirus (COVID-19) is:</p> <ul style="list-style-type: none"> a face mask if a distance of 2 metres cannot be maintained; 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 e.g. from coughing, spitting or vomiting. <p>N.B. A cloth face covering is NOT regarded as PPE.</p>		<ul style="list-style-type: none"> they have had a positive test in the last 10 days; They have been told to self-isolate by NHS Test and Trace or their public health protection team. <p>They must immediately cease to attend and not attend for at least 10 days from the day after:</p> <ul style="list-style-type: none"> the start of their symptoms the test date if they did not have any symptoms but have had a positive test (whether this was a Lateral Flow Device (LFD) or Polymerase Chain Reaction (PCR) test) <p>1.1) Child or adult with symptoms outside school</p> <p>In BwD, the Director for Public Health is advising that anyone with a wider range of symptoms which include: diarrhoea, a persistent headache, fever and chills, shortness of breath or difficulty breathing, fatigue, muscle or body aches, sore throat, congestion or runny nose, and nausea or vomiting should book a PCR test. They can still attend school/work while awaiting the result <i>unless</i> they also have one of the three main symptoms.</p> <p>a) Staff (and other adults working in the school) notify school <i>immediately</i> if either they or someone in their home, support bubble or childcare bubble is displaying symptoms of Covid-19 infection and follow the PHE stay at home guidance which sets out that they must self-isolate for at least 10 days and should arrange to have a test to see if they have coronavirus (Covid-19).</p> <p>b) Parents/carers notify school <i>immediately</i> if either their child or someone in the child’s household, support bubble or childcare bubble is displaying symptoms of Covid-19 and follow the PHE “Stay at Home” guidance as above and arrange to have a test. Ensure a letter has been sent home informing them of symptoms and a link to the guidance. This includes the children of key workers;</p> <p>c) Where a family or member of staff is having difficulty</p>	<p>Remind new staff of guidance during induction</p> <p>HT to send out reminder of updated guidance to parents of pupils attending the provision.</p> <p>These practices already in place and appropriate cleaning products purchased and available for use by all staff. Daily cleaning schedules with times, dates and cleaning actions in operation. Isolation room marked and known to all staff.</p>	
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		<p>accessing a test, schools may support by providing them with a test from the test kits issued directly to schools from central government – guidance is available here.</p> <p>d) Other members of the household (including any siblings, support and/or childcare bubble members) should self-isolate from the day the individual took the test and at least 10 full days after, and not attend school.</p> <p>1.2) Child or adult who develop symptoms in school</p> <p>a) If it is a member of staff and they can drive themselves home, they should do so immediately;</p> <p>b) All areas they have been should be cleaned down using schools usual cleaning materials following PHE guidance;</p> <p>c) Decide on rooms within the setting which can be used as isolation rooms and identify with appropriate signage if in use;</p> <p>d) Where an adult needs to be collected, they should be removed to a room where they can be isolated with the door closed and a window open for ventilation.</p> <p>e) If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child and with appropriate adult supervision if required.</p> <p>f) PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). They must follow the donning and doffing guidance. Ideally, a window should be opened for ventilation. More information on PPE use can be found here.</p> <p>g) If it is not possible to isolate them, move them to an area that is at least 2 metres away from other people. If they need to use the toilet, a separate one to the rest of the school population should be used if possible.</p> <p>h) All PPE worn by the supervising adult should be removed as</p>		<p>All staff completed Donning and Doffing training</p> <p>All bubbles have PPE bins with instructions regarding disposal attached.</p> <p>First aid book used for this purpose</p> <p>Staff are regularly reminded of these procedures.</p>	
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			<p>per the donning and doffing guidance. This, along with disposable cleaning cloths and tissues, should be put it in a plastic rubbish bag and tied it when full. Place the plastic bag in a second bin bag and tie it. Put it in a suitable and secure place marked for storage for 72 hours, safely and securely kept away from children. Do not put the waste in communal waste areas until the waste has been stored for at least 72 hours.</p> <p>i) Any member of staff who has provided close contact care to someone with symptoms, even while wearing PPE, and all other members of staff or pupils who have been in close contact with that person with symptoms, even if wearing a face covering, need to wash their hands thoroughly for 20 seconds but do not need to go home to self-isolate unless:</p> <ul style="list-style-type: none"> • the symptomatic person subsequently tests positive; • they develop symptoms themselves (in which case, they should arrange to have a test); • they are requested to do so by NHS Test and Trace or the PHE advice service (or the Education Response Team/PHE local health protection team if escalated). <p>j) Record which staff have looked after/had contact with the symptomatic child;</p> <p>k) In an emergency, call 999 if the person is seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care centre or a hospital.</p> <p>l) The isolation room, bathroom and anywhere else the symptomatic person has been should be cleaned after they have left following PHE guidance;</p> <p>m) Consider removing the rest of the children and staff to a different part of the school while cleaning takes place.</p> <p>n) The symptomatic pupil or adult should be tested for Covid-19.</p> <p>In exceptional circumstances</p> <p>o) Where the parent/carer is unable to collect the child, and the school needs to take responsibility for transporting the child</p>			
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			<p>home, they should use:</p> <ul style="list-style-type: none"> • A vehicle with a bulkhead; • The driver and passenger should be 2m apart; • The driver should wear PPE and the passenger should wear a fluid resistant surgical facemask if old enough to do so. <p>Contact the LA for assistance in sourcing a vehicle and driver if necessary;</p> <p>p) Avoid the use of public transport;</p>			
2) Transmission of virus due to insufficient hand hygiene	x	x	<p>a) Schools must ensure that pupils and staff clean their hands (can be a combination of washing and/or sanitising) with frequency and rigour, including when they arrive at school, when they go for and return from breaks, when they change rooms, before and after removing face coverings and before and after eating;</p> <p>b) Wash bowls to be provided to enable children in wheelchairs to access handwashing regularly. The water must not be shared between pupils and must be disposed of into the sink.</p> <p>c) Ensure access to soap, warm water, paper towels and hand sanitizer and skin friendly sanitizer wipes if appropriate in all classrooms and social areas;</p> <p>d) Pupils (and staff) wash hands for 20 seconds following PHE guidance. See “six steps to hand-washing” poster in KS2 lesson and NHS video;</p> <p>e) Staff to help small children and those with complex needs to wash their hands thoroughly;</p> <p>f) Include hand washing in lessons and specifically teach the skill if appropriate for the pupils</p> <p>g) Have prominently displayed hand washing posters throughout the setting in order to build regular hand washing into the culture of the school;</p> <p>h) Ensure hand sanitizer stations are located away from light switches, lift buttons</p>		<p>Practices in places as follows:</p> <p>Hand washing posters in all bathrooms/ child friendly/ symbol versions</p> <p>Handwashing after every sneeze and cough and visit to the bathroom and every time a person changes rooms or enters building and before lunch.</p> <p>Children with are supervised washing hands/using hand sanitiser to ensure correct usage.</p> <p>Sanitizer in each</p>	✓

			<ul style="list-style-type: none"> i) Ensure use of hand sanitizer is supervised where necessary to avoid risk of ingestion; j) Ensure bins emptied regularly throughout the day. k) Incorporate time for hand washing/sanitising in timetables or lesson plans. l) Ensure that staff working with pupils who spit uncontrollably to have more opportunities to wash their hands than other staff; m) Ensure that pupils who use saliva as a sensory stimulant or who struggle with 'catch it, bin it, kill it' have more opportunities to wash their hands. 		<p>classroom and by all entrance doors and in public areas of school-</p> <p>Bins with lids in each classroom and public areas. These are emptied at least daily and more if needed as indicated by frequency of use.</p> <p>Staff to be reminded of all above in training 31st August and 4th January</p>	
3) Transmission of virus due to insufficient respiratory hygiene	x	x	<p>3.1) Face coverings</p> <p>At Newfield School we acknowledge that, due to the support needs of the vast majority of our pupils, it is not possible for staff to social distance from pupils. Parents are made aware of this.</p> <p>Where appropriate pupils are taught about social distancing, the need for it and how to do it if they can.</p> <p>All pupils have Individual Infection Control Risk Assessments (IICRA). This indicates when staff should wear PPE to support the pupils and what PPE they should wear for each type of support. Staff MUST wear PPE as indicated in the risk assessments but are at liberty to wear full PPE (ensuring they follow their training) for sessional use if they chose to do so. Staff are all trained in donning and doffing procedures with additional support from the school nursing team.</p> <p>All PPE is provided by school and is compatible with PHE and</p>		<p>At Newfield School we acknowledge that, due to the support needs of the vast majority of our pupils, it is not possible for staff to social distance from pupils. Parents are made aware of this. Where appropriate pupils are taught about social distancing, the need for it and how to do it if they can.</p>	✓

			<p>NHS recommendations. Staff should refrain from wearing their own face coverings whilst working with the children.</p> <p>If staff are using public transport they are responsible for storing their face covering securely and out of reach of children during the school day</p> <p>3.2) Ensuring good respiratory hygiene</p> <p>a) Promote the catch it, kill it, bin it approach – display posters prominently in classrooms and around school in order to embed this into the culture of the school;</p> <p>b) Ensure all rooms are well ventilated; School air and ventilation systems are set to recommended settings as per guidance from HSE https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm Guidance from Chartered Institute of Building Services Engineers has also been consulted. The following system of control underpins practice in school:</p> <ul style="list-style-type: none"> - Open windows where possible - Open doors where possible (not fire doors) - Spend as short a time as possible in rooms with no external opening door or windows - Ensure corridors are subject to extra robust cleaning <p>c) Schools must ensure there are sufficient stocks of tissues in place for pupils and staff to use;</p> <p>d) Schools must ensure there are sufficient covered bins in place and that they are emptied regularly throughout the day;</p> <p>e) Schools must ensure young children and those with complex needs receive support and are able to get this right;</p> <p>f) Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to</p>		<p>All pupils have Individual Infection Control Risk Assessments (IICRA). This indicates when staff should wear PPE to support the pupils and what PPE they should wear for each type of support. Staff MUST wear PPE as indicated in the risk assessments but are at liberty to wear full PPE (ensuring they follow their training) for sessional use if they chose to do so. Staff are all trained in donning and doffing procedures with additional support from the school nursing team. All PPE is provided by school and is compatible with PHE and NHS recommendations. Staff should refrain from wearing their own face coverings whilst working with the children.</p>	
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			<p>support these pupils and the staff working with them, and is not a reason to deny these pupils face to face education.</p> <p>3.3) Ventilation – ensuring a supply of fresh air</p> <ul style="list-style-type: none"> a) Adjust mechanical ventilation systems to increase the ventilation rate wherever possible; and maintain in accordance with the manufacturers recommendations b) Check to confirm that their normal operation meets current guidance (if possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply); c) Where schools use a centralised ventilation system that removes and circulates air to different rooms it is recommended that the recirculation function is turned off and a fresh air supply is used; d) Air conditioning systems that mix some of the extracted air with fresh air and return it to the room do not need to be adjusted as this increases the fresh air ventilation rate; e) Systems in individual rooms or portable units do not need to be adjusted as these operate on 100% recirculation. You should still however maintain a good supply of fresh air ventilation in the room. f) In cooler weather, open windows enough to provide constant background ventilation at all times when classrooms are in use; g) Open windows more fully during breaks to purge the air in the space; h) Wedge internal doors open (with the exception of fire doors) to create a throughput of air,, but ensure they can't slam shut and cause injury to staff or children; i) External opening doors may also be used (as long as they are not fire doors and where safe to do so); j) Ensure internal office spaces are well ventilated at all times. Keep doors open to allow air flow. Do not use fan heaters 		<p>If staff are using public transport they are responsible for storing their face covering securely and out of reach of children during the school day</p> <p>All staff completed donning and doffing training</p> <p>School has implemented procedure where staff/ SEN advisory visitors advised to wear visors when working within 2m of child is unavoidable for learning in addition to hand hygiene measures.</p> <p>SEN advisory visitors follow school Co-vid Guidelines</p> <p>School adopts a policy of no visitors unless authorised by the Headteacher.</p>	
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			<p>when the office is occupied.</p> <p>3.4 Ventilation – temperature control</p> <ul style="list-style-type: none"> a) Open high level windows to low level reduce draughts where possible; b) Increase ventilation when rooms are unoccupied; c) Providing flexibility to allow additional, suitable indoor clothing. For more information see School uniform; d) Rearrange furniture where possible to avoid direct drafts; e) Use heating as necessary to ensure comfort levels are maintained particularly in occupied spaces; Use fan heaters only when rooms are unoccupied, switch off when children and staff are in. 		<p>School has good stocks of all hygiene items including tissues and hand sanitiser.</p>	
<p>4) Transmission of virus through insufficient cleaning of surfaces</p>	X	X	<ul style="list-style-type: none"> a) Follow the Covid-19: cleaning in non-healthcare settings guidance; b) Maintain and document an enhanced schedule for the cleaning of all surfaces using standard cleaning products and disposable cloths or paper towels; c) If it is felt appropriate to return difficult to clean items such as soft toys and furnishings to use, clean more frequently and according to manufacturer’s instructions; d) Clean all shared rooms and shared areas between different groups; e) Clean toilets regularly throughout the day - different groups can be allocated their own toilet blocks where possible; f) All staff should know how to safely put on and take off PPE, please see PHE links to donning and doffing of PPE. Refresh regularly and document; g) All staff should complete the Me Learning course ‘Infection Prevention Control for Frontline Workers’. Refresh regularly 		<p>Update when new PHE revised guidance is published.</p> <p>All staff completed donning and doffing training.</p> <p>Site staff are trained in cleaning touch points and surfaces and are currently carrying this out daily using appropriate products and tick lists dated and timed to demonstrate when</p>	✓

			<p>and document;</p> <p>h) Appropriately trained and designated staff clean frequently touched surfaces before the start of each school day using the school's standard cleaning products. These surfaces include- door handles, hand rails, chairs, desks, IT equipment, toys, play equipment, mobile phones, toilet doors, flush handles, taps, bin lids, dining tables, etc.</p> <p>i) Bins used to dispose of cleaning materials such as sanitizing wipes and paper towels should be lidded. Dispose of routine waste as normal, placing any used cloths or wipes in 'black bag' waste bins. You do not need to put them in an extra bag or store them for a time before throwing them away;</p> <p>j) Cleaning materials ordered by Caroline Richens and issued by Bill Trezise. Stock control is the responsibility of the site team.</p> <p>k) Supervising staff mirror this cleaning regime (including personal mobile phones and tablets) throughout the day during transition times e.g. break, lunch, while pupils are outside, changing from one type of activity to another;</p> <p>l) Evidence cleaning routine – use tick sheet signed and dated by the person carrying out the cleaning for each area.</p> <p>m) Allocate hand-sanitizing stations around school including in classrooms and communal areas where appropriate. Teach pupils the correct way to use hand sanitizer. See poster here.</p> <p>n) Uniforms do not need to be cleaned any more often than usual, nor do they need to be cleaned using methods which are different from normal.</p> <p>o) Keep surfaces clutter free to facilitate regular cleaning.</p>		<p>cleaning takes place.</p> <p>Bins with lids in each changing/toilet facility and public areas. These are emptied at least daily and more if needed as indicated by frequency of use. These are also emptied by site staff at lunch times</p> <p>Site supervisor checks stocks daily.</p> <p>Sanitizer in each classroom and by all entrance doors and in public areas of school-</p>	
<p>5) Transmission of virus through contact between individuals</p> <ul style="list-style-type: none"> Schools must do everything possible 	X	X	<p>5.1 Groupings in school</p> <p>a) the school will be split into two bubbles; SEND and Autism. Practice Principles are agreed by all staff and these indicate that:</p> <ul style="list-style-type: none"> close contact time should be minimised Side on contact with pupils and other staff should be prioritised 		<p>Practice Principles to be agreed and</p>	

<p>to minimise contacts and mixing while delivering a broad and balanced curriculum.</p> <ul style="list-style-type: none"> Schools should strike a balance between both reducing the number of contacts between children and staff through keeping groups separate (in 'bubbles'), and through maintaining distance between individuals. It is likely that for younger children the emphasis will be on separating groups, and for older children it will be on distancing. For children old enough, they should also be supported to maintain distance and not touch staff where possible. 		<ul style="list-style-type: none"> For face to face contact e.g. intensive interaction a face shield should be worn Keep contacts to a minimum <p>b)staff should not move unnecessarily between the 2 sites. If they do social distance should be maintained and all elements of the schools systems of control. Staff should minimise their visits to office spaces/ other classrooms and use other modes of communication (phone/ email) where possible</p> <p>d)in circumstances when absence cover is needed between the 2 bubbles staff should make themselves aware of each pupils Individual Infection Control Risk Assessment and follow this carefully. Absence cover will be drawn from:</p> <ul style="list-style-type: none"> * 'in bubble' * within school but outside of bubble * exclusive agreed supply * if all else fails, consideration of closure, or partial closure, of a group <p>d)distancing between pupils should be encouraged and where pupils can understand this it should be taught and explained to them.</p> <p>5.2 In Classrooms</p> <ol style="list-style-type: none"> Ensure good ventilation at all times; Staff should avoid close face to face contact and minimise time spent within 1 metre of anyone; This will not be possible when working pupils who have complex needs or who need close contact care. These pupils' educational and care support should be provided as normal; Where pupils are old or able enough, they should be supported to maintain distance and not touch staff and their peers where possible through reminders from staff and appropriate signage; Adapt classrooms to facilitate more distancing by removing unnecessary furniture; Optimise respiratory hygiene by having pupils facing forwards rather than face to face or side on. 		<p>developed by staff</p> <p>School operates in strict bubbles for both children and staff.</p>	
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		<ul style="list-style-type: none"> g) If singing is featured as part of lessons or indoor activities maintain distance and use a face shield/ visor h) Issue children and staff with their own set of frequently used resources such as pens, pencils and other stationary; i) Classroom based resources, such as books, IT and games, can be used and shared within the bubble. These should be cleaned regularly, along with all frequently touched surfaces; j) Resources that are shared between classes or bubbles, such as sports, arts, and science equipment should be cleaned frequently and always between bubbles; k) Where resources are shared between bubbles but are difficult to clean, allow them to be left unused for a period of 48 hours (72 hours for plastics); l) Assess the ability to clean equipment used in the delivery of therapies, for example, physiotherapy equipment or sensory equipment. Determine whether this equipment can withstand cleaning and disinfecting between each use before it is put back into general use. Where cleaning or disinfecting is not possible or practical, resources will have to be either restricted to one user or left unused for a period of 48 hours (72 hours for plastics) between use by different individuals; m) Avoid using any resources/toys with small parts which are difficult to clean; n) Outdoor playground equipment should be more frequently cleaned than normal. This also applies to resources used inside and outside by wraparound care and out of school settings providers; o) Children can bring bags to school, but limit what they bring to essential items such as hats/coats/gloves etc., lunch boxes, books, stationary and mobile phones; p) Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided. Rules on hand cleaning, cleaning of the resources and rotation should apply to these resources. 		<p>Staff still distancing as much as possible but are also wearing full PPE as indicated in Child's Individual Infection Control Risk Assessment</p> <p>School operating no volunteer policy until further notice</p> <p>Large gatherings such as assemblies not to take place until further notice</p> <p>Breaks and lunches staggered to ensure No mixing between</p>	
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		<p>5.3 Physical activity in schools</p> <p>From 8 March Under-18 sport can take place at school as part of educational provision, or as part of wraparound care, but should not otherwise take place at this time.</p> <p>From 29 March the Government will also allow outdoor sports facilities to reopen, broadening the options for outdoor exercise and recreation. These facilities, such as tennis and basketball courts, and swimming pools, can be used by people in line with the wider social contact limits. Formally organised outdoor sports – for adults and under 18s - can also restart and will not be subject to the gatherings limits, but should be compliant with guidance issued by national governing bodies.</p> <ol style="list-style-type: none"> a) Pupils should be kept in their consistent groups (bubbles); b) Sports equipment should be thoroughly cleaned between each use by different bubbles; c) Only consider those sports whose national governing bodies have developed guidance under the principles of the government’s guidance on team sport and been approved by the government i.e. sports on the list available at grassroots sports guidance for safe provision including team sport, contact combat sport and organised sport events; Also see: <ul style="list-style-type: none"> • guidance on grassroots sports for public and sport providers, safe provision and facilities, and guidance from Sport England; • advice from organisations such as the Association for Physical Education and the Youth Sport Trust; • guidance from Swim England on school swimming and water safety lessons available at returning to pools guidance documents; • Using changing rooms safely. d) Prioritise outdoor sports; e) Use large indoor spaces where using outdoor space is not possible and ensure good ventilation at all times; f) Pay scrupulous attention to cleaning and hygiene due to the 		<p>classes within a bubble.</p> <p>Lunches: Lunches per bubble will be placed on trolleys ready for collection</p> <p>Class staff to collect trolleys from kitchen on strict rota system</p> <p>Site team to collect trolley (empty) from classes return to kitchen wipe down</p> <p>Each class to have a plastic box with lid to be placed on worktop for dirty plates</p> <p>Each class to have a bin bag for waste food</p> <p>Class to place all plates and cutlery in the box and waste in the black bag and store next to their kitchen area in class ready for collection</p>	
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		<p>way people breathe during exercise;</p> <p>g) Only consider the use of the indoor gym in school when indoor gyms are opened as part of the wider easing of restrictions. All equipment must be cleaned between bubbles;</p> <p>h) Schools can work with external coaches, clubs and organisations for the delivery of PE sessions. Schools must ensure that the provider follows the protective measures in place in school. There should be no sharing of resources during sessions and all equipment must be cleaned between groups. External coaches, instructors etc. should maintain 2m social distance at all times where possible;</p> <p>i) Outdoor competition between schools can take place within the system of controls and following National Governing Body guidance(host and visiting schools should risk assess travel and changing and either build into this RA or embed within their PE RA)</p> <p>j) Indoor competition between different schools should not take place until wider indoor grassroots sport for under 18s is permitted - no earlier than 12th April 2021, DfE to confirm.</p> <p>k) Swimming sessions can resume with the opening of leisure centres (no earlier than 12th April 2021). Follow the Swim England Returning to Pools guidance (see c above). Risk assess travel and the use of changing rooms as appropriate.</p> <p>5.4 Measures elsewhere</p> <p>a) Keep groups of pupils apart by avoiding large gatherings such as assemblies or collective worship;</p> <p>b) Minimise movement around school where possible</p> <p>c) Staff should ensure pupils do not move around the building unnecessarily e.g. into an office to deliver a message</p> <p>d) Stagger movement times and avoid bottlenecks at entrances/exits;</p> <p>e) Continue to operate one way systems with appropriate signage in place;</p>		<p>Site team and kitchen staff to start to collect boxes and rubbish from each classes - these won't be in class for longer than an hour max and that will be for the first collection class only.</p> <p>Staff to clean surfaces in staffroom after use.</p> <p>Children to be transported to the appropriate site and strict social distancing / hygiene will be adhered to on their minibus. Transport staff have PPE and have been trained in systems of control. Protocol advises that they should not collect pupils that are displaying symptoms of C19 prior to embarkment. If pupils, display any symptom of C19</p>	<p>Staff to be reminded regularly to clean surfaces in staffroom after use.</p>
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			<p>f) Pupils will eat lunch in their classrooms to minimise larger gatherings</p> <p>g) Food will be transported to classrooms safely in trolleys and managed safely by staff within the classroom</p> <p>h) School kitchens should be fully open and must comply with the guidance for food businesses on coronavirus (COVID-19).</p> <p>i) When engaged in MOVE sessions stringent hygiene and transition management measures taken</p> <p>j) Staff should ensure they are maintaining social distancing when on PPA time</p> <p>k) Minimise use of staff room and ensure access to cleaning products for staff to wipe surfaces etc. before and after use.</p> <p>l) Alternative breakout spaces for staff provided at lunchtimes</p> <p>m) Staff breaks split into morning and afternoon slots</p> <p>n) Additional cleaning of touched surfaces should be considered before and after adults use the bathroom.</p> <p>5.7 Arriving and leaving school</p> <p>a) Please refer to guidance on Transport to School . Schools who commission or provide their own transport to school should use this guidance to inform their Travel to School RA. Schools may wish to consider this as a separate risk assessment.</p> <p>b) Pupils should be collected from transport by staff members from their own bubble only</p> <p>a) Parents/carers and pupils should be encouraged to avoid using public transport and walk to school where possible.</p> <p>b) Families and staff using public transport should refer to the safer travel guidance for passengers.</p> <p>a) Keep parents/carers informed of new routines and remind them not to gather in groups or enter the school grounds without an appointment;</p> <p>b) Maintain/adjust drop-off/pick-up protocols as necessary and inform parents/carers;</p>		<p>whilst on the transport, arrangements are made for them to be returned home without entering school building.</p> <p>Parents asked not to enter school unless agreed by Headteacher</p> <p>School has implemented a “no cash” payment policy.</p> <p>No visitor policy introduced in school. Phone or conference meetings to be used as alternative</p> <p>Supply agencies not be used.</p> <p>Bank of 3 exclusive staff members (Julie, Linda and Jackie) to be used in emergencies</p>	
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		<p>c) All staff and pupils must wash their hands on arrival at school;</p> <p>5.8 Other considerations</p> <p>a) In the first instance, conduct meetings with parents remotely if appropriate IT equipment is available. Where there is no alternative but to arrange face to face meetings with a parent/carer, only one person plus an interpreter should attend. Ensure the room is well ventilated and large enough to allow for social distancing; with attendees wearing face coverings unless exempt;</p> <p>b) Consider the use of screens at such meetings and at the main school reception;</p> <p>a) The use of supply teachers and support staff will be kept to minimum. If they are used they will be drawn from a bank that only exclusively work at Newfield. All supply staff and therapists will be provided with guidance and expectations regarding protocols they must follow when in school.</p> <p>b) Maintain established Covid-19 procedures for contractors and similar visitors to the school site, arranging for them to come out of school hours where possible and ensuring a record is kept of who has been on site;</p> <p>c) Ensure that pupils have their own set of frequently used resources such as pens, pencils, maths equipment etc. kept in a wipeable case;</p> <p>d) Classroom based resources, such as books and games, can now be used and shared within the bubble; these should be cleaned regularly, along with all frequently touched surfaces using standard cleaning products. Keep a track of what has been cleaned, by whom and when and evidence this with a tick sheet;</p> <p>e) Resources shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different</p>		<p>Contractor visits to be arranged outside school hours wherever possible. If emergency dictates an urgent visit they will be accompanied round site by member of staff and asked to adhere to visitor policy.</p> <p>No children currently attend more than one setting.</p> <p>Staff have own equipment. Computers/ iPads are cleaned after use.</p> <p>All resources which are cleanable are cleaned at end of school day by staff and noted on cleaning list s in classrooms.</p>	
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			<p>bubbles. Again, keep a track of and evidence this as above</p> <ul style="list-style-type: none"> f) Continue to limit the amount of equipment pupils bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery and mobile phones, all of which can be brought in in a bag; g) Pupils and teachers can take books and other shared resources home but only where necessary. Staff and pupils should clean hands before and after using these resources, and they should be cleaned and quarantined. Home school diaries will be replaced with Evidence for Learning. h) Consider alternative options to face to face interviews where possible. See the DfE teaching blog for conducting remote interviews and there is also advice that can be sent to candidates on how to prepare for remote interviews. i) Where face to face meetings are necessary for recruitment purposes, share the school's control measures in advance and make it clear to candidates that they must follow the system of controls that you have in place. This includes any requirements for wearing face coverings where social distancing cannot be managed safely. j) Ensure ITT trainees on placement are offered coronavirus (COVID-19) testing in the same way other school staff are (see Section 7); k) Ensure ITT trainees are informed of and follow all control measures put in place by school. <p>5.9 Asymptomatic Lateral Flow Testing</p> <ul style="list-style-type: none"> a) Mass asymptomatic testing will be in place for staff from 13th January 2021. This will identify quickly any asymptomatic cases in the school staff. b) Testing is optional and where positive cases are identified those individuals and any close contacts will be sent home 		
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			<p>immediately to self isolate. Any positive results will be followed up by a PCR test the outcome of which will give a definitive result to the individual.</p> <p>c) Testing carried out by specific, trained staff (see separate risk assessment)</p>			
<p>6) Transmission of virus due ineffective use of PPE</p> <p>Face coverings are not classified as PPE (personal protective equipment). PPE is used in a limited number of settings to protect wearers against hazards and risks, such as surgical masks or respirators used in medical and industrial settings. A face covering is a covering of any type which covers your nose and mouth.</p>	x	x	<p>a) All staff should know how to safely put on and take off PPE, (refresh regularly and document), please see PHE links to donning and doffing of PPE.</p> <p>b) All staff should complete the MeLearning course 'Infection Prevention Control for Frontline Workers'. (refresh regularly and document)</p> <p>c) Staff should wear a face mask at all times in school as advised by BwD.</p> <p>d) Staff should wear additional PPE where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained as in Section 1.2 f above;</p> <p>e) Staff should wear PPE where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used;</p> <p>f) Staff should wear PPE as per BwD guidance for First Aiders in Appendix A.</p> <p>g) For more specific guidance on safe working in education, click here.</p> <p>h) When working with children and young people who cough, spit or vomit but do not have coronavirus (COVID-19) symptoms, only any PPE that would be routinely worn, should be worn;</p> <p>i) Additional PPE is needed if aerosol generating procedures (AGPs) are carried out in school.</p>		<p>All staff completed donning and Doffing training.</p> <p>PPE to be worn as indicated in child's individual infection control risk assessment</p>	✓
<p>7) Asymptomatic testing</p>	✓	✓	<p>a) Promote and engage in voluntary asymptomatic testing where available following setting specific guidance as below;</p> <p>j) Specialist settings participating in the rapid asymptomatic testing programme should follow the Rapid Asymptomatic</p>		<p>Completed for staff</p> <p>Not appropriate for pupils</p>	

[testing in Specialist Settings](#) guidance.

Response to infection

8) Test and Trace

x

x

- a) Schools must ensure they understand the procedures they must follow in the PHE NW Test and Trace document. Monitor the HT bulletin/Services for Schools website for the most up to date version.
- b) Schools must communicate with staff and parents/carers so that they understand they must be ready to [book a test](#) if they or a child is displaying [symptoms](#), give details of anyone they have been in close contact with if they test positive or are asked by a contact tracer. Also see Section 1.1 regarding BwD advice on the wider symptoms of COVID-19;
- c) School must communicate with staff and parents/carers so that they understand [self-isolate](#) in the circumstances at the start of section 1 above and provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace;
- d) If the result is **positive**, they must follow the stay at home guidance for households with possible or confirmed Coronavirus (Covid-19) and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste.
- e) Schools should be familiar with and implement the [NHS COVID-19 app in schools and further education colleges guidance](#).
- f) If a setting has premises on site that are within the scope of the Health Protection (Coronavirus, Collection of Contact Details and Related Requirements) Regulations 2020, as described in the current [guidance for](#)

This message has already been communicated to parents but will be to be reiterated on a regular basis.

NHS QR posters displayed in school entrances

✓

			<p>maintaining records of staff, customers and visitors to support NHS Test and Trace, then they are legally required to have a NHS QR poster for this space. See here for further details.</p> <p>g) Schools participating in the rapid asymptomatic testing programme should follow the Mass asymptomatic testing: schools and colleges guidance for handling any positive tests as a result of that programme.</p> <p>h) The PCR test kits sent to schools can be given directly to staff or parents and carers collecting a child who has developed symptoms at school. Further information is provided in the guidance Coronavirus (COVID-19): test kits for schools and FE providers;</p> <p>i) Some school staff, parents and carers may be eligible for a one-off Test and Trace Support Payment. Follow this link for more details and share as appropriate.</p>			
9) Manage confirmed cases of coronavirus (COVID-19) amongst the school community	x	x	<p>a) Follow the procedures outlined in the PHE NW Resource Pack for Schools. This is updated regularly – updates are posted on the HT bulletin.</p> <p>b) Confirmed cases must be reported to the LA in a timely manner (i.e. on the day the result is received) via edresponseteam@blackburn.gov.uk</p>		This message was shared with staff in training 31 st August.	✓
10) Contain any outbreak by following local health protection team advice	x	x	<p>a) Follow procedures set out in the PHE NW Resource Booklet;</p> <p>b) Contact edresponseteam@blackburn.gov.uk</p>		This message has been shared with SLT.	✓
Risks involving school operations						
11) Transmission of virus on transport	x		10.1) Dedicated school transport (services that are used only to carry pupils to school. This includes statutory home to school transport, but may also include some existing or new commercial travel routes, where they carry school pupils only).		Liaise with transport but their responsibility overall.	✓

			<p>DFE will publish separate guidance shortly</p> <p>Newfield will liaise with transport to provide information about which bubbles staff and pupils are in to enable to arrange transport as safely as possible</p> <ul style="list-style-type: none"> a) On arrival and dismissal the pupils will enter and exit the building in an orderly manner. Staff will supervise to ensure there is no crowding or 'bottle neck' b) If vehicles park at school pupils to remain on board until there is sufficient space for them to disembark safely c) If pupils can and want to wear face coverings this will be arranged between transport and parents d) Communicate protocols and expectations to parents and pupils before the start of the Autumn Term. e) if a child is displaying symptoms on the vehicle the passenger assistant should notify transport and parents and take the child (and any siblings) straight home. They should not bring them to school or disembark them from the vehicle. Individual or exceptional circumstances should be discussed and resolved by transport coordinator and a member of Newfield SLT. f) For more detail, click here. <p>10.2) Public transport</p> <ul style="list-style-type: none"> a) Encourage parents/carers, staff and pupils to walk or cycle to school; b) Investigate working with the LA to secure funding to support walking or cycling to school. c) Ensure families and staff who use public transport are aware of the safer travel guidance for passengers. 		<p>Check DFE guidance regularly as update is due</p>	
12) Risks to vulnerable groups within the school population	x	x	<p>Shielding advice is being paused nationally from 31 March. From 1st April, CEV individuals are no longer advised to shield but must continue to follow the rules in place for everyone under the current national restrictions.</p>		<p>SLT to liaise with health care providers to ensure pupils are</p>	

		<p>Blackburn with Darwen Borough Council in line with Government guidance are advising those who have received a letter from the NHS advising them they are clinically extremely vulnerable to follow the advice set out in the letter. Employees and pupils who are clinically extremely vulnerable are required to share the letter they have received with the Head Teacher, so appropriate action can be taken.</p> <ul style="list-style-type: none"> a) School should be aware of any pupil, staff or family member with a serious underlying health condition; b) Any school roles which can be done from home should be if feasible and appropriate (e.g. administrative roles); <p>12.1) Pupils who are clinically vulnerable or clinically extremely vulnerable</p> <ul style="list-style-type: none"> c) All pupils and students should continue to attend education settings from 1st April 2021 unless they are under paediatric or other NHS care and have been advised by their GP or clinician not to attend an education setting. d) Communicate Covid-19 control measures in place in school to provide reassurance to families where key worker/vulnerable pupils relatives are shielding or where there are increased risk factors such as BAME, obesity or diabetes; e) Risk assess all clinically vulnerable/clinically extremely vulnerable pupils able to access provision individually. <p>12.2) Staff who are clinically vulnerable or clinically extremely vulnerable</p> <ul style="list-style-type: none"> f) Staff who are Clinically Extremely Vulnerable (CEV) are advised where possible to work from home, if they cannot work from home a robust risk assessment (using the LAs People (Education) Risk Assessment) must be carried out and stringent Covid measures put in place; g) Clinically Vulnerable (CV) staff can remain in the workplace subject to completion of a robust risk assessment using the LAs People (Education) Risk 		<p>risk assessed and supported appropriately on an on-going basis</p> <p>School aware which families are in this category. SLT has discussed with relevant parents, communicating school safety measures-arrangements made to do off-site learning if R rates rise significantly.</p> <p>Virtual learning is in place with all teachers responsible for providing this</p> <p>Staff who are/have been shielding have completed a personal risk assessment. All staff working from home meet weekly to monitor wellbeing and to share information re school.</p>	
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			<p>Assessment. A full definition of CV staff is included in the LA People RA, but does include BAME, all staff aged 60+, and all pregnant women. For any further information contact: health.safety@blackburn.gov.uk for the latest version;</p> <p>h) The risk assessment will inform the Managers/Head Teachers if it is appropriate for the staff member to return to the workplace and if so what control measure are required.</p> <p>i) Based on the People Risk assessment outcome and where appropriate control measures can be implemented, the Staff member may be able to return to work.</p> <p>j) It is important that all staff are properly risk assessed before attending work. It is also strongly advised that where possible, deployment options are discussed with this group of staff to enable remote working for at least part of the working week in order to reduce their level of risk.</p> <p>k) Risk assess <u>all</u> clinically vulnerable staff (including BAME and all pregnant women) <u>individually</u> using the BWD People Risk Assessment (Education). The risk assessment will inform the Managers/Head Teachers if it is appropriate for the staff member to return to the workplace and if so what control measure are required. Schools People Risk assessment.</p> <p>l) Based on the People Risk assessment outcome and where appropriate control measures can be implemented the Staff member may be able to return to work.</p> <p>m) It is important that all staff are properly risk assessed before returning to work. It is also strongly advised that where possible, deployment options are discussed with this group of staff to enable remote working.</p> <p>n) If based on the people risk assessment and all</p>		<p>ITT trainees are critical workers and can continue their placements. They are to follow school safety procedures.</p>	
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			<p>appropriate control measures are in place, (these must include stringent hand and respiratory hygiene practices and <u>strict social distancing</u>.) The individual may be able to return to the work place as long as all these can be observed at all time. Advice for <u>guidance on shielding and protecting the extremely vulnerable</u>.</p> <p>o) People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.</p> <p>p) Where staff have characteristics that put them more at risk (see <u>Covid-19: review of disparities in risks and outcomes report</u>) and are concerned about returning to work, discuss concerns and risk assess individually;</p> <p>q) Where there are concerns about the mental wellbeing of those staff who are being advised to stay at home and we would recommend that you share the EAP support that is available to them through your school.</p> <p>12.3 Pregnant staff (classed as clinically vulnerable)</p> <p>r) Pregnant women over 28 weeks, should not be in the workplace and should work from home</p> <p>s) It is strongly recommended that women under 28 weeks carry out roles which enable them to work flexibly within their job/role in a position that allows them to maintain strict social distancing at all times. If this is not possible (e.g. because the worker is a teacher or a TA with a classroom role where strict social distancing is not possible, including small group work), it is advised that alternate roles/jobs should be sought or it is recommended that work should be sought that can be undertaken from home.</p> <p>t) Government advice on pregnancy can be found <u>here</u>.</p> <p>For other staffing considerations, including staff support,</p>		
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			deployment, recruitment, temporary and peripatetic, ITT trainees, staff leave etc. see Actions for Schools – guidance for full opening Section 2 and scroll down to the appropriate section.			
13) Estates considerations	x	x	<p>a) Where schools have electric hand driers, these can be used, but pupils (and staff) must wash their hands thoroughly for 20 seconds following PHE guidance. See “six steps to hand-washing” poster in KS2 lesson and NHS video. They must then follow the hand drier manufacturer’s instructions for drying hands (usually to hold hands under the air stream for 30 – 40 seconds without rubbing hands together until dry).</p> <p>b) Ensure all statutory safety checks are carried out;</p> <p>c) Where buildings have been closed or have had reduced occupancy, follow the guidance on Legionella risks during the coronavirus outbreak;</p> <p>d) Ensure all classroom windows that can be opened are able to be opened safely. Safety devices may need to be fitted in some instances;</p> <p>e) Where the school has an air conditioning system, follow advice in the Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak.</p> <p>f) Refer to guidance on managing school premises during the Coronavirus (Covid-19) outbreak.</p>		<p>Wash basins in classes for children unable to access conventional handwashing stations</p> <p>School has remained open and all statutory checks have continued and are up to date.</p> <p>Windows opened regularly and are in good order.</p>	✓
14) Educational Visits	x	x	<p>Please refer to the Schools Operational Guidance for information regarding credit notes and indemnity.</p> <p>14.1) Educational Day Visits</p> <p>a) In line with the roadmap, should step 2 commence as planned, schools can resume educational day visits no earlier than 12 April;</p> <p>b) Educational day visits must be conducted in line with relevant coronavirus (COVID-19) secure guidelines and regulations in place at that time;</p> <p>c) Visits should be conducted using Covid secure measures</p>			

			<p>d) which mirror the ones in place in this risk assessment; Before the visit takes place, the Visit Leader should request copies of Covid secure measures in operation at the venue to be visited, and these should be shared with the rest of the visit team and the pupils on the visit;</p> <p>14.2) Domestic Residential Visits Schools can begin to plan for new domestic residential visits, but are advised not to enter into any new financial or contractual commitments until step 3 of the roadmap has been confirmed. Deferred visits can take place as planned once step 3 is confirmed.</p> <p>a) In line with the roadmap, should step 3 commence as planned, domestic residential educational visits can resume no earlier than 17 May. The roadmap is driven by data not dates. The approach to domestic residential visits is dependent on the roadmap and is subject to change.</p> <p>b) Existing or rearranged domestic residential educational visits must be conducted in line with relevant coronavirus (COVID-19) secure guidance and regulations in place at the time they take place;</p> <p>c) Any new domestic residential educational visits must be conducted in line with relevant coronavirus (COVID-19) secure guidance and regulations in place at that time;</p> <p>d) The DfE is working with Public Health England and the School Travel Sector Stakeholder Group (STSSG) on what coronavirus (COVID-19) secure residential visits will look like at step 3. This is likely to take the form of a Covid safe charter. Further advice will be provided through updated guidance via EVOLVE and the HT bulletin.</p> <p>14.3) International Visits Schools are advised not to enter into new financial or contractual commitments at this time.</p>			
15) Contingency plans for future outbreaks			<p>a) For individuals or groups of self-isolating pupils, remote education plans should be in place. For further details, see here;</p>		Rapid revisit of existing risk assessment	✓

			<p>b) Have a contingency plan in place should PHE Health protection Team or the LA advise school to close to all but vulnerable children and the children of key workers to reduce transmission rates;</p> <p>c) Remote education support programme is in place for pupils working from home during the current period of national lockdown and this will continue in the event of a local lockdown (see link in a) above)</p>		Regular training and guidance to teachers regarding expectations of home learning.	
16)Onsite support for pupils with SEND medical needs	x		<ul style="list-style-type: none"> • The Special School Nursing Team (SSNT) will provide nursing support to Newfield school • Two members of the team will attend, based in SEND school medical room, to minimise numbers of people in the school and to ensure some element of social distancing – other team members will work remotely and maintain contact with parents via phone to support medical needs – this will be reviewed weekly by nursing manager and DHT • SSNT will wear PPE provided by LCFT • SSNT will be responsible for cleaning and wiping down of the medical room both during the day and at the end of the session before leaving the building, adhering to stringent hygiene practices • School staff coming to the room to collect medication will adhere to social distancing where possible - a medication timetable is drawn up to reduce traffic in the room • Medications will be located in 3 areas across the site – SEND school nursing room, medical room opposite Head teacher office and Autism main admin office – staff are informed of this via clear signage. • Gastrostomy equipment will be dropped off in feed room and SSNT staff will wipe down all equipment and bags, set up feeds, then deliver to classes. Classes to rinse feed equipment then send home – do not return equipment to feed room to avoid cross contamination. • Trained school staff will be used to support children requiring medical support – medication administration etc 		<ul style="list-style-type: none"> • JR will liaise with SSNT managers to address any issues • Julie Brannon will provide rota of SSNT covering in school • HW and VC will ensure school staff are appropriately deployed JR to ensure meds timetables and signage re meds location is shared with staff JR to deliver briefing re meds and feeds to staff to clarify processes and disseminate via document. 	✓

18) Staff well being		x	<p>Staff are supported by senior staff and have access to Employee Assist Programme (EAP)</p> <ul style="list-style-type: none"> • HR advice is available relating to pay and employment concerns • Staff are encouraged to speak about their concerns with their line manager and raise any health and safety concerns immediately • School Well-Being policy updated to reflect impact of COVID-19 • SLT actively encourage feedback from staff on all well-being and operational matters 		SLT to monitor	✓
19) Monitoring	✓	✓	<p>a) The HT should have mechanisms in place to ensure regular monitoring of the implementation of control measures in this risk assessment.</p> <p>b) Where schools have purchased the Health and Safety SLA from the LA, please contact health.safety@blackburn.gov.uk for any support required. If not, please contact your Health and Safety provider.</p>			✓

Head Teacher Signature: Rik Robinson **Date:** 08.03.2021 **Date of Review:** 12.04.2021

Chair of Governors/Trust CEO: Sara Barr-Frost **Date:** 08.03.2021 **Date of Review:** 12.04.2021

Local Authority/Trust CEO: **Date:** **Date of Review:**

Appendix A

Advice for First Aiders in Schools/Early Years Settings during Covid-19

We recognise that first aid remains a crucial skill even as the country deals with the COVID-19 pandemic. We have put together the below advice for first aiders so that you can continue to support others where required and keep yourself safe.

Government guidance on first aid response during Covid-19 can be found [here](#).

Keep yourself safe

During the Covid-19 pandemic, it is recommended that you wear gloves and a facemask for all first aid incidents. Eye protection and an apron may also be required, where there is a risk of coming into contact with bodily fluids. PPE can be found with/in first aid kits.

Please see Public Health guidance on how to safely put on ([don](#)) and take off ([doff](#)) PPE, advice posters should be located with first aid kits. It is recommended that employees who are first aiders familiarise themselves with safe use of PPE as soon as possible, so they are able to keep themselves and the casualty safe, when they respond to a first aid incident.

In line with government advice, make sure you wash your hands or use an alcohol gel, before and after treating a casualty. Avoid touching your mouth, eyes and/or nose.

Ensure that you do not cough or sneeze over a casualty when you are treating them, if you need to cough, do this into your elbow.

- Do not lose sight of other cross contamination that could occur that is not related to COVID-19.
- Wear gloves at all times
- Cover cuts and grazes on your hands with waterproof dressing
- Dispose of all waste safely – double bag and place in a bin
- Do not touch a wound with your bare hand
- Do not touch any part of a dressing that will come in contact with a wound

Cardiopulmonary resuscitation (CPR) – Adults

Full statement from the Resuscitation Council can be found [here](#)

If you are required to perform cardiopulmonary resuscitation (CPR), you should conduct a risk assessment (this would be a “dynamic risk assessment” at the time) and adopt appropriate precautions for infection control.

Do not go down close to the casualty to check breathing just look at the chest and abdomen. Ring 999, ensure you are wearing a mask and start compressions.

For adults, it is recommended that you do not perform rescue breaths or mouth-to-mouth ventilation; **perform chest compressions only**. Resuscitation Council (UK) Guidelines 2010 for Basic Life Support state that studies have shown that compression-only CPR may be as effective as combined ventilation and compression in the first few minutes after non-asphyxial arrest (cardiac arrest due to lack of oxygen).

If a decision is made to perform mouth-to-mouth ventilation, you must use a resuscitation face shield or mask from your first aid kit.

Should you have given mouth-to-mouth ventilation there are no additional actions to be taken other than to monitor yourself for symptoms of possible COVID-19 over the following 14 days. Should you develop such symptoms you should follow the advice on isolation.

Cardiopulmonary resuscitation (CPR) – Paediatric Advice

We are aware that paediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child's chances of survival. However, for those not trained in paediatric resuscitation, **the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation, call 999 immediately.**

The importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur.

It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths may increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. 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.

If a decision is made to perform mouth-to-mouth ventilation, you must use a resuscitation face shield or mask from your first aid kit.

Paediatric First Aid Ratios and Validity

Current guidance states that if children aged 2-5 are within a setting, providers must use their 'best endeavours' to ensure one person with a full PFA certificate is on-site. If after using best endeavours they are still unable to secure a member of staff with full PFA to be on site then they must carry out a risk assessment and ensure that someone with a current First Aid at Work or Emergency PFA Certification is on site at all times children are on premises.

'Best endeavours' means to identify and take all the steps possible within your power, which could, if successful, ensure there is a Paediatric First Aider on site when a setting is open, as per the usual EYFS requirement on PFA.

New entrants (levels 2 and 3) will not need to hold a Paediatric First Aid (PFA) certificate within their first 3 months in order to be counted in staff:child ratios, during the COVID-19 outbreak.

Additionally, if PFA certificate requalification training is prevented for reasons associated directly with COVID-19, or by complying with related government advice, the validity of current certificates can be extended by up to 3 months. This applies to certificates expiring on or after 16 March 2020.

Providers remain responsible for ensuring all children in their care are kept safe at all times.