

Name of person completing the risk assessment:		Mr S.G. Bell		Date: 01/10/21			
What are the hazards?	Who might be harmed and how?	What control measures are already in place? Are they sufficient?	What additional control measures are needed?	Action by who?	Action by when?	Actioned?	
Children, parents and staff are unsure of the procedures for reducing the risk of spreading the virus	Staff/pupils/stake holders	People are aware of key aspects of social distancing and the risk assessments employed in school. School has successfully reopened.	<p>Weekly letters are sent to parents to ensure communication is strong including outlining the additional measures that are needed in the event of a coronavirus outbreak.</p> <p>Weekly staff meetings/bulletins include updates on amendments to the Risk Assessment.</p> <p>SECONDARY</p> <p>We will retain a small on-site asymptomatic testing facility on site.</p> <p>Full staff meetings will move back to being virtual until further notice.</p> <p>Testing will continue for staff (primary and secondary) and secondary aged pupils during the autumn term.</p> <p>Staff and students are encouraged to take part in twice weekly testing at home during the holidays, obtaining kits from the local pharmacy.</p> <p>Staff or pupils with a positive LFD test result will need to self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result if the test was done</p>				

			<p>at home. Those with a negative LFD test result can continue to attend school and use protective measures.</p> <p>The household unit infographic gives details of how long a household should self-isolate.</p> <p>If a temporary testing unit is established in the area, the Principal must encourage all staff and students to use the facility in order to stop the spread of the virus.</p>			
<p>Misunderstanding of the DfE guidance</p>	<p>Staff misunderstand the exact government guidelines leading to inappropriate actions being taken at the school</p> <p>Key stakeholders who are at risk include but are not limited to:</p> <p>Staff (teaching and non-teaching) including supply/visiting staff; pupils; parents entering the site; family members who come into contact with pupils in their</p>	<p>Current procedures used in school reflect safe practices and school has been safe.</p>	<p>All staff will have the opportunity to read and comment on the risk assessment. Clarification will be provided where necessary.</p> <p>Staff will sign the risk assessment to acknowledge receipt.</p> <p>All staff will be given a hard and electronic copy of the risk assessment.</p> <p>Leaders and staff will use this risk assessment whenever a decision regarding coronavirus is made. Adaptations will be made in consultation with the CEO.</p> <p>We may reintroduce bubbles at any time following advice from public health England.</p> <p>Risk mitigation rules continue and include:</p> <ol style="list-style-type: none"> 1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school. 2) Ensure everyone is advised to clean their hands thoroughly and more often than usual. 3) Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach. 4) Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents. 5) Keep occupied spaces well ventilated. <p>In specific circumstances:</p>			

	homes etc; contractors; other visitors	<p>6) Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary.</p> <p>7) Promote and engage in asymptomatic testing when advised.</p> <p>Response to any infection</p> <p>We will:</p> <p>8) Promote and engage with the NHS Test and Trace process.</p> <p>9) Contain any outbreak by following local health protection team advice.</p> <p>The majority of staff will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:</p> <p>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</p> <p>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>School will ensure that appropriate support is made available for pupils with SEND, for example by deploying teaching assistants and enabling specialist staff from both within and outside the school to work with pupils in different classes or year groups.</p> <p>Where support staff capacity is available, we may consider using this to support catch-up provision or targeted interventions. Teaching assistants may also be deployed to lead groups or cover lessons, under the direction and supervision of a qualified, or nominated, teacher (under the Education (Specified Work) (England) Regulations 2012 for maintained schools and non-maintained special schools and in accordance with the freedoms provided under the funding agreement for academies). Any redeployments will not be at the expense of supporting pupils with SEND.</p> <p>All teachers and other staff can operate across different classes and year groups in order to facilitate the delivery of the school timetable.</p>			
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School events that include more than 1 year group such as assemblies/collective worship/Masses will be paused until further notice due to the local outbreak.

Occupied spaces must be well ventilated. The following applies:

- mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible, and checked to confirm that 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)
- natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air
- natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)

Further advice on this can be found in Health and Safety Executive guidance on [air conditioning and ventilation during the coronavirus outbreak](#) and CIBSE coronavirus (COVID-19) advice.

To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures should also be used as appropriate:

- opening high level windows in preference to low level to reduce draughts
- increasing the ventilation while spaces are unoccupied (e.g. between classes, during break and lunch, when a room is unused)
- providing flexibility to allow additional, suitable indoor clothing (only if classrooms are extremely cold). Children and staff should be encouraged to wear plain vests or equivalent under shirts etc.
- rearranging furniture where possible to avoid direct drafts

Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces

Children and staff to wash/sanitise hands as they arrive at school, before break, after break, before lunch, after lunch and before they leave school.

Additional toilet cleaning will take place throughout the day with cleaners using gloves and, if required, a visor. Cleaners will use IIR face coverings when cleaning toilet areas.

Additional hand cleaning facilities will be available on the school site to meet demand.

Table tops and other areas need to be cleaned carefully as required with anti-viral spray or equivalent.

IT equipment to be cleaned with an anti-viral cloth (or equivalent) as required.

All potentially contaminated high-contact areas such as toilets, door handles, telephones must be cleaned regularly. Cleaners should wear gloves when cleaning these areas. Additional PPE should be provided such as a visor if required.

Parents to send their child in uniform and work with the school to encourage good hygiene practices.

The full curriculum will run including PE and music.

School is able to work with external coaches, clubs and organisations for curricular and extra-curricular activities.

Extra-curricular activities (that is, before and after school clubs) will resume. This complements the extension of the school day for taught catch-up curricular provision. These sessions will continue as before.

PE, sport and physical activity provided by school can continue including internal and external competitions. This includes sports clubs or activities before or after school, in addition to regular PE lessons following the risk assessment guidance as above.

Restrictions on music lessons are ended.

After-school support will operate restriction free.

Parents' Evenings/Open Evenings etc should be virtual until further notice due to the local outbreak. Parents and stakeholders will be informed as the events approach.

Clinically extremely vulnerable staff

Clinically extremely vulnerable (CEV) people are no longer advised to shield but may wish to take extra precautions to protect themselves, and to follow the practical steps set out in the CEV guidance to minimise their risk of exposure to the virus. School will work with such individuals.

Staff who are pregnant

Pregnant women are considered 'clinically vulnerable' or in some cases 'clinically extremely vulnerable' to coronavirus (COVID-19) and therefore require special consideration as set out in the guidance for pregnant employees.

Principals (or a person designated by them) will carry out a risk assessment to follow the Management of Health and Safety at Work Regulations 1999 (MHSW). Information contained in the Royal College of Obstetricians and Gynaecologists, Royal College of Midwives [guidance on coronavirus \(COVID-19\) in pregnancy will be used as the basis for a risk assessment.](#)

Pregnant women of any gestation should not be required to continue working if this is not supported by the risk assessment.

Women who are 28 weeks pregnant and beyond, or are pregnant and have an underlying health condition that puts them at a greater risk of severe illness from COVID-19 at any gestation, should take a more precautionary approach. We will ensure pregnant women are able to adhere to any active national guidance on social distancing and/or advice for pregnant women considered to be clinically extremely vulnerable (this group may previously have been advised to shield).

Where an employee is still breastfeeding, this must be included and managed as part of the general workplace risk assessment. We will take appropriate sensible action to reduce, remove or control the risks.

Staff and children who are clinically vulnerable or have underlying health conditions but are not clinically extremely vulnerable, may continue to attend school in line with current guidance.

Clinically extremely vulnerable pupils

			<p>All CEV children and young people should attend school unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their GP or clinician not to attend.</p> <p>All children aged 12 and over are now eligible for COVID-19 vaccination. Those aged 12 to 17 are eligible for a first dose of the Pfizer/BioNTech COVID-19 vaccine, although 12 to 17 year olds with certain medical conditions that make them more at risk of serious illness, or who are living with someone who is immunosuppressed, are eligible for 2 doses. These children will be contacted by a local NHS service such as their GP surgery to arrange their appointments. All other 12 to 15 year olds will be offered the vaccine via the school-based programme. Young people aged 16 to 17 will be invited to a local NHS service such as a GP surgery or can access the vaccine via some walk-in COVID-19 vaccination sites.</p> <p>All official information on the vaccination programme for 12-15 year olds will be shared through the School Age Immunisation Service (SAIS). There has been some misinformation activity by campaigners. We will get in touch with the local SAIS provider if in doubt or if we receive a form that we think may not be genuine. Further guidance can be found in the COVID-19 vaccination programme for children and young people guidance for schools.</p> <p>We will work closely with health officials to facilitate the vaccination programme.</p>			
<p>Child needs intimate care or falls ill in school</p>	<p>Children not treated appropriately if requiring intimate care or injured or ill</p>	<p>A first-aider will be on site at all times.</p>	<p>Children, young people or learners who require first aid should continue to receive care in the same way. No additional PPE is needed because of coronavirus (COVID-19) for anyone who does not have coronavirus (COVID-19) symptoms.</p> <p>A disposable plastic apron should be used in the case of those children whose care routinely already involves the use of PPE due to their intimate care needs or special educational need. Relevant staff to read:</p>			

			<p><u>safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE)</u></p>			
<p>Child/staff member falls ill on site with suspected coronavirus symptoms</p>	<p>Staff supervising the ill child/supporting the member of staff and others who may come into contact with them could be exposed to the virus</p>	<p>Staff are aware of the symptoms of coronavirus</p>	<p>Reference to PPE below means:</p> <ul style="list-style-type: none"> •fluid-resistant surgical face masks •disposable gloves •disposable plastic aprons •eye protection (for example a face visor or goggles) <p>The PPE that should be used in the following situations when caring for someone with symptoms of coronavirus (COVID-19) is as follows:</p> <ul style="list-style-type: none"> •a face mask should be worn if a distance of 2 metres cannot be maintained •if contact is necessary, then gloves, an apron and a face mask should be worn •if a risk assessment determines that there is a risk of fluids entering the eye from, for example, coughing, spitting or vomiting, then eye protection should also be worn <p>When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and following guidance on how to put PPE on and take it off safely in order to reduce self-contamination.</p> <p>Face masks must:</p> <ul style="list-style-type: none"> •cover both nose and mouth •not be allowed to dangle around the neck •not be touched once put on, except when carefully removed before disposal •be changed when they become moist or damaged •be worn once and then discarded - hands must be cleaned after disposal 			

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 of the child and with appropriate adult supervision if required.

Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.

If they need to go to the toilet while waiting to be collected, they should use a separate toilet if possible. The toilet should be cleaned and disinfected using standard cleaning products before being used by anyone else. In this instance, cleaners should be given gloves, a splash resistant face covering and a visor.

In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care centre or a hospital.

Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) or they have been requested to do so by NHS Test & Trace.

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household disinfectant after they have left to reduce the risk of passing the infection on to other people. See the COVID-19: cleaning of non-healthcare settings guidance.

All stakeholders to be reminded that those who have coronavirus symptoms **MUST NOT** attend school. The household (including any siblings) should follow the PHE stay at home [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:

book a PCR test if they are displaying symptoms. For any families reluctant/unable to arrange their own test, one of the limited school test kits may be issued. The [online portal](#) should be used to order additional coronavirus (COVID-19) test kits if we are running out of kits. We are able to

make a new order for test kits 21 days after receiving a delivery confirmation email telling us that our previous supply of test kits has been sent. These kits are only for those who develop one of the [symptoms of coronavirus \(COVID-19\)](#) and face significant barriers to accessing a test. NHS Test and Trace will be contacted on 119 for any issues or queries about the supply, ordering or delivery of test kits.

Staff and pupils must not come into the school if they have classic symptoms ie a persistent cough, a high temperature or a loss of taste and smell, and must be sent home to self-isolate if they develop them in school.

Furthermore, if a person has the following symptoms, a test should be arranged. They can attend school but only if they are well enough to do so and only need to self-isolate if the test comes back positive:

- Headaches
- Aches and pains
- Feeling very tired for no good reason
- Sore throat
- Runny nose
- Sneezing
- Sometimes 'tummy ache' in children

All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit

provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test & Trace

From 16 August 2021, children under the age of 18 years and 6 months old will no longer be required to self-isolate if they are contacted by NHS Test and Trace as a close contact of a positive COVID-19 case. Instead, children will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would **strongly** encourage all individuals to take a PCR test if advised to do so. 18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point,

they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact. School will continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.

Note: A member of staff or a student should not, however, arrange to have a PCR test if they have previously received a positive PCR test result in the last 90 days unless they develop any new symptoms of COVID-19. This is because it is possible for PCR tests to remain positive for some time after COVID-19 infection. In these cases, the person can continue to attend school.

Leaders will ask parents and staff to inform them immediately of the results of a test:

if someone tests negative, if they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can stop self-isolating. Code X should only be used up until the time of the negative test result when the pupil can return to school.

Individuals are not required to self-isolate if they live in the same household as someone with COVID-19, or are a close contact of someone with COVID-19, and any of the following apply:

they are fully vaccinated

they are below the age of 18 years and 6 months

they have taken part in or are currently part of an approved COVID-19 vaccine trial

they are not able to get vaccinated for medical reasons

Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would **strongly** encourage all individuals to take a PCR test if advised to do so.

Staff who do not need to isolate, and children and young people aged under 18 years 6 months who usually attend school, and have been identified as a close

			<p>contact, should continue to attend school as normal unless specific and severe outbreaks lead the Principal to advise those who live in a household with a positive case to await a PCR test to self-isolate until the PCR result is known. We must strike a careful balance between reducing the spread of infection and the need for children to be in school following such severe disruption to their education. Code X will be used in these circumstances until the result is known. It is expected and recommended that face coverings are worn when travelling on public or dedicated transport.</p> <p>We will not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.</p> <p>In the majority of cases, schools and parents will be in agreement that a child with symptoms should not attend school, given the potential risk to others. In the event that a parent or guardian insists on a child attending school, we can take the decision to refuse the child if in our reasonable judgement it is necessary to protect our pupils and staff from possible infection with coronavirus (COVID-19). Any such decision would need to be carefully considered in light of all the circumstances and the current public health advice.</p>			
There is a confirmed case of coronavirus in school	Stakeholders on site contract the virus	Staff awareness of the previous coronavirus risk assessment	<p>If someone tests positive, they should follow the 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection' and must continue to self-isolate for at least 10 days following the first day 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. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day from the day after when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 10 days following the day when a person first became ill.</p> <p>All cases should also be reported to the LA's Covid-19 Local Outbreak Co-ordinating Team using the email address:</p>			

			<p>C19Loc.education@staffordshire.gov.uk</p> <p>NHS COVID-19 app</p> <p>The app is available to anyone aged 16 or over to download if they choose. For some young people, particularly some with special educational needs and disabilities (SEND), parents will need to decide whether or not their use of the app is appropriate.</p> <p>SECONDARY:</p> <p>This will mean that some students in year 11, and the majority of students in years 12 and above will be eligible to use the app and benefit from its features. However, phones should not be left on during the course of the day.</p> <p>PRIMARY AND SECONDARY:</p> <p>Staff members will also be able to use the app. Staff are encouraged to switch their phones off when they are left in a bag etc in a room separate to where they are teaching/working.</p>			
<p>Increased risk of adults spreading the virus to each other at work.</p> <p>Risk of staff not following the correct procedures to mitigate risks.</p>	<p>Staff not following the risk assessment or the guidance within it leading to an enhanced risk of contracting the virus</p>	<p>Current procedures at school are known and understood</p>	<p>We strongly encourage all staff to be fully vaccinated and, for those eligible, to receive boosters. If staff have any concerns over the vaccination programme, we ask for open and honest discussions so that they can be signposted to health professionals to clarify any uncertainty.</p> <p>Ensure there are plentiful supplies of soap, hand sanitiser, disposable paper towels, cleaning products, sanitising wipes for wiping some equipment, lidded bins, tape for cordoning off areas and marking floors, disposable gloves and aprons that can be washed on a daily basis. Posters (for example, to encourage consistency on hygiene and keeping to own group) to be displayed throughout the school.</p> <p>Staff should be reminded of the following principles:</p>			

•wash your hands more often - with soap and water for at least 20 seconds or use a hand sanitiser when you get home or into work, when you blow your nose, sneeze or cough, eat or handle food

•avoid touching your eyes, nose, and mouth with unwashed hands

•avoid close contact with people who have symptoms

•cover your cough or sneeze with a tissue, then throw the tissue in a bin and wash your hands

•clean and disinfect frequently touched objects and surfaces

Staff desks and IT equipment to be cleaned with disinfectant or an anti-viral cloth when a new member of staff begins to use it.

Do not come to work if you have coronavirus symptoms, or go home as soon as these develop (informing your manager), and access a test as soon as possible.

Explicitly teach and supervise health and hygiene arrangements such as handwashing, tissue disposal and toilet flushing.

Supply teachers, peripatetic teachers and/or other relevant staff can move between schools. Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual.

SECONDARY:

Face coverings should be worn by pupils, staff and visitors in communal areas until further notice.

Staff/students may choose to wear a face covering if in classrooms if this supports their mental health and wellbeing.

Until further notice, we expect all students to continue to wear face coverings on dedicated transport to school or college and on public transport. This is because they will be in a confined space with people they do not normally spend time with.

PRIMARY:

			Face- coverings should be worn by adults when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained.			
Absence could increase due to anxiety of the virus	Staff/child wellbeing is affected Children/staff miss out on valuable educational opportunities including social interaction	Absence procedures for staff and children Wellbeing Policy	<p>Staff should notify school as normal if they are due to attend but are ill/anxious. Full support should be given by the line manager/Principal in line with the Absence Policy and strategies implemented to facilitate a return to work.</p> <p>Families should notify school as normal if their child is unable to attend so that staff can explore the reason with them and address barriers together. School will continue to inform social workers where children with a social worker do not attend.</p> <p>It is vital for all children to attend school to minimise as far as possible the longer-term impact of the pandemic on their education, wellbeing and wider development.</p> <p>We will provide, where necessary, focused pastoral support for pupils' individual issues, drawing on external support where necessary and possible.</p> <p>If parents of pupils with significant risk factors are concerned, we will discuss their concerns and provide reassurance of the measures we are putting in place to reduce the risk in school. If necessary, an additional personalised risk assessment will be produced.</p> <p>We are clear that parents of pupils of compulsory school age must be in school unless a statutory reason applies (for example, the pupil has been granted a leave of absence, is unable to attend because of sickness, is absent for a necessary religious observance etc).</p> <p>Missing out on more time in the classroom risks pupils falling further behind. Those with higher overall absence tend to achieve less well in both primary and secondary school. School attendance is mandatory. This means the usual rules on school attendance apply, including:</p> <p>parents' duty to secure that their child attends regularly at school where the child is a registered pupil at school and they are of compulsory school age;</p> <p>our responsibility to record attendance and follow up absence</p>			

the availability to issue sanctions, including fixed penalty notices in line with local authorities' codes of conduct

Leaders will identify children with poor attendance records. This should include disadvantaged and vulnerable children and young people, especially those who were persistently absent prior to the pandemic. Additional work, such as telephone calls/EWW support/additional catch-up work/wellbeing discussions etc will take place.

The government now knows much more about coronavirus (COVID-19) and so there are fewer children and young people advised to shield whenever community transmission rates are high. Therefore, the majority of pupils will attend school. We are aware that:

a small number of pupils will still be unable to attend in line with public health advice because they are self-isolating and have had symptoms or a positive test result themselves; or because they are a close contact of someone who has coronavirus (COVID-19). They will be recorded as code X in the register. After the pupil tests positive they should be recorded as code I (illness) until they are able to return to school..

If rates of the disease rise in local areas, children (or family members) from that area, and that area only, will be advised to shield during the period where rates remain high and therefore they may be temporarily absent (see below).

Some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional (usually at their next planned clinical appointment). Parents can find more advice from the Royal College of Paediatrics and Child Health.

Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, remote learning will be immediately offered to them. We will monitor engagement with this activity. They will be recorded as code X in the register. See note above re Code I following a positive test result.

We will provide free school meal support to any pupils who are eligible for benefits-related free school meals and who are learning at home during term time.

			<p>Classrooms have been fitted with technology to enable live teaching to take place.</p> <p>Absence will not be penalised in the above instances.</p> <p>The Department for Education is providing additional support for both pupil and staff wellbeing in the current situation. Information about the extra mental health support for pupils and teachers should be made known to all staff.</p> <p>The Education Support Partnership provides a free helpline for school staff and targeted support for mental health and wellbeing.</p> <p>As usual, parents should plan their holidays within school breaks and avoid seeking permission to take their children out of school during term time. Families should also consider that their child may need to self-isolate following trips overseas that require a period of quarantine. If a pupil is required to be in quarantine on arrival in, or return to, the UK, code X should be used in the register.</p> <p>Where pupils (and their parents or guardians or family member) meet the UK entry requirements and have travelled from or through a ‘red list’ country in the previous 10 days, they must quarantine in a managed quarantine hotel for 10 days.</p> <p>Pupils travelling from amber list countries need to follow government advice. Pupils travelling from green list countries do not need to quarantine unless their COVID19 test result is positive.</p>			
Insufficient supervision due to a member of staff falling ill on site/absent	Children not adequately supervised		<p>MAC CEO/DCEO to be informed of any staffing level concerns so alternative arrangements can be sought safely.</p> <p>Supply staff may be used following discussion with the CEO and the COO being informed.</p>			
Safeguarding measures may slip due to the	Children are not safe	Full Safeguarding	DSL/DDSL to ensure all staff are reminded of Safeguarding Procedures including the reporting of concerns on MyConcern.			

unique nature of the situation		Procedures to be followed	Additional time to be given to DSLs if required to support the staff and children regarding new welfare concerns and the handling of referrals. Communication with school nurses is important for supporting safeguarding and wellbeing. DSL/DDSL to attend LA updates.			
Self-isolation causes the pupils to miss school	Children miss out on more educational opportunities	Live learning and effective remote teaching has been successfully implemented.	All staff and pupils in the following years will be reminded/instructed of how to access live teaching. Pupils will be able to access live teaching throughout the day. Younger pupils will be given remote activities to complement the live teaching.			
Lack of understanding of whether trips can run	Children miss out on opportunities	Full risk assessments written for each trip	From the start of the autumn term, we can go on domestic and international visits that have previously been deferred or postponed and organise new international visits for the future. We are 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. The travel lists may change during a visit and we must comply with international travel legislation and will have contingency plans in place to account for these changes. Prior to arranging a visit, we will speak to either the visit provider, commercial insurance company, or the Risk Protection Arrangement (RPA) to assess the protection available. Independent advice on insurance cover and options may be sought from the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI). Any existing bookings holding ATOL or ABTA refund credit notes may use these credit notes to rebook educational or international visits. School will 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) .			

<p>A local outbreak occurs leading to the government/Public Health England/local authority enforcing local measures</p>	<p>Key stakeholders who are at risk include but are not limited to: Staff (teaching and non-teaching) including supply/visiting staff; pupils; parents entering the site; family members who come into contact with pupils in their homes etc; contractors; other visitors</p>	<p>School has implemented the measures in this Risk Assessment prior to the latest guidance regarding contingency planning. Full remote teaching is planned for.</p>	<p>PRIMARY AND SECONDARY:</p> <p>If there is a positive case in school, local health advisory and protection teams will advise on implications for the school and if others need to self-isolate. This will in part depend on how long it has been since the pupil was on-site.</p> <p>The school will work with the DfE and the LOC team if there is extremely high prevalence of coronavirus</p> <p>The contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings. Local authorities, directors of public health (DsPH) and PHE health protection teams (HPTs) can recommend measures described in the contingency framework in individual education and childcare settings – or a small cluster of settings – as part of their outbreak management responsibilities.</p> <p>Key point to note re the threshold for a local outbreak, whichever of these thresholds is reached first:</p> <ul style="list-style-type: none"> • 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or • 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period 			
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All staff to sign to confirm they have a copy of this Risk Assessment.