

Windermere School, Elleray and Browhead Campus.

COVID 19 - Operations Risk Assessment.

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Risk Assessment:	Operations procedures for running Windermere School in stage 2, Open with Caveats.	School / Location(s):	Windermere School	Assessors:	RH		
Risk assessment Date:	6 th January 2022	Proposed Review Date:	28 th January 2022	Signed off by:	TH and EV		
Individuals at Risk	All employees, pupils, visitors, contractors, members of the public, the people they live with and their other close contacts, in particular, vulnerable children (as classified by DfE or LA guidance or school), vulnerable adults, anyone who is Black, Asian, Minority Ethnic (BAME), young/ inexperienced workers, new/ expectant mothers, anyone experiencing ill-health or who has pre-existing medical conditions, and first aiders/nurses/intimate care providers.						
Risks	Covid-19 or the novel coronavirus (Covid-19) is a new, highly infectious and serious respiratory illness that can cause death, critical illness, and other serious and potentially long-term health complications we are still learning about. The virus can be transmitted by contact with a bodily fluid containing it, most commonly saliva droplets dispersed into the air (aerosols) through talking, coughing, sneezing, and the performance of some healthcare tasks, which are then breathed in by other people nearby or the droplets land on surfaces that others touch, getting into their body when they then touch their face, especially their own mouth, nose and eyes. This may lead to anxiety and other wellbeing issues amongst staff, pupils and parents. Risks arising from lack of building/equipment particularly during periods of partial or full closure. The ability to effectively implement fire and other emergency procedures may be compromised due to reduced staff numbers for example.						

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Aims	objective	es ot th	e RA:

The greatest risk here is that inappropriate arrangements are made for opening the school causing infection to spread and leading to serious respiratory illness or death. The key aim is therefore to manage the ongoing 'duty of care' the School has for our whole community: Governors, Staff, Parents and Pupils. We also need to consider the wider community in which we operate.

To ensure Windermere School complies with Government guidance as it relates to students returning to school to be taught on site rather than remotely:

• Windermere School – In line with the guidance from Central Government has been open since 8th March 2021. Guidance allows the School to open to all year groups on the basis that a Site Specific Risk Assessment is completed, to identify hazards relating to COVID 19 and to put in place the required controls.

This Risk Assessment is for the teaching period of the Spring Term only, and will need to be re-assessed on an ongoing basis, as government guidance changes.



Issues to hold in mind in
relation to this risk
assessment:

The test when considering whether a duty has been properly discharged is "what would the reasonable person have done, or not done, in the circumstances of this particular incident?"

- This risk assessment is based on current knowledge and guidance and will need up-dating in line with new guidance as it comes in.
- Many of the risks will need assessing dynamically. The seriousness of likely infection will have to be assessed on a case-by-case basis, e.g. some pupils/staff have more vulnerability to COVID-19 than others.
- Some of the *possible* management strategies may be impossible due to Physical constraints of the school campus, exorbitant costs or difficulties in procuring materials.

Clearly, we cannot expect very young children to socially distance at all times when they are in school and neither does the Government expect this, but what we can do is encourage students (using our best endeavours) to observe high standards of personal hygiene where the environment and curriculum permits. Staff should endeavour to socially distance as much as possible, but it is unreasonable to expect that they will not have some direct contact with students. All Staff have had the opportunity to be vaccinated, and anyone who has not, given the opportunity to complete a personal Risk Assessment. Lateral Flow Testing is the next line of defence for all members of the School and test kits will be provided to facilitate twice weekly testing.

Windermere School is an International Boarding School and International Travel guidance and quarantine requirements will be monitored and delivered as required at the time of the journey.

Varying states of openness will be referred to as:

For the purposes of this Risk Assessment a number of stages of operation (SO) for Windermere School has been considered:

- 1. Fully Open Business as usual: no travel or trip restrictions.
- 2. Open Business as usual: with caveats visitors in line with protocols and trip restrictions.
- 3. Open T In transition: some teaching in school and some remotely.
- 4. Open B In transition: with boarders.
- Open K Key staff and vulnerable children in school. All other teaching provided remotely.
- 6. Open R Teaching is all achieved remotely.
- 7. Fully Closed No one on site except residents, security and maintenance staff.

This Risk Assessment relates to the Open stage at BOTH Elleray and Browhead Campuses.

Management of risk,

Elimination of the Risk of infection with Covid 19 is not possible and so the Duty of Care owed to the School Community is fulfilled as follows.

Reducing the risk (RR) = return to a School with a series of control measures in place to reduce the potential contact opportunities.

Isolate the risk (IR) = keep students/staff with the infection (or symptoms of the infection) in isolation at home or, if boarders, in quarantine accommodation.

Control the risk (CR) = use (where required) protective equipment such as facemasks, aprons, gloves and Perspex screens, maintaining bubbles with minimal mixing and good hygiene.

For risks that involve the on-site, contained and controlled operation of the School, residual risks have been assessed as Low because the children will be in contact with limited numbers of known and trusted colleagues who are following isolation and control procedures.



	Where residual risk remains at a Medium level this is because of the introduction of an unknown third party or if there is a risk of non-disclosure of symptoms. For example delivery personnel, students using public transport, however all contractors and visitors are subject to separate protocols.
In Stage 2, Open with Caveats at Windermere School, further School policies are affected by the control measures as summarised.	1) WS COVID Plan v 22.1
Student, staff and parent contracts (SSPs)	Staff, students and parents are asked to agree to a set of Expectations prior to pupils returning. These will be based on the key aspects of these risk assessments, with the aim of encouraging all members of our community to act in the best interests of the community as a whole.
KEY RISKS	 Indifference to social distancing guidelines or resorting to "old behaviours" forgetfulness or wilful disregard. Asymptomatic entry of Covid 19 into School. Negligent behaviour by infected persons not openly disclosing their symptoms and isolating. Community stress/concerns – we need regular and consistent messaging and contact. Lack of social distancing ** transmission of Covid19 Poor cleaning ** transmission of Covid19 Continued disruption of learning e.g. movement in and out of remote learning, not having entire year groups in school, etc. Management of boarders returning in a way that maintains community confidence.



	Risk	Control Measures	Notes/Additional Control Measures	Residual
	Rating	What are we doing now?	What more do we need to explain/do?	Risk
An individual develops Covid-19 symptoms or has a positive test	High	 Pupils, staff and other adults should follow public health advice on when to selfisolate and what to do. They should not come into school if they have COVID-19 symptoms (a new continual cough, a temperature in excess of 37.8°C or a loss of, or change in their normal sense of taste or smell (anosmia) *), have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on Covid-19 (e.g. they are required to quarantine). If anyone in school develops COVID-19 symptoms, however mild, we will send them home and they should follow public health advice and self-isolate and should arrange to have a test: if a child or member of staff tests negative, then they should stay at home until they are recovered as usual from their illness but can safely return thereafter. Other members of their household can stop self-isolating; if a child or member of staff with symptoms 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 from the day of onset of their symptoms and for the following 10 full days and then return to school only if they do not have a temperature (a cough or anosmia can last for several weeks once the infection has gone). The period of isolation starts from the day they became symptomatic and the following 10 full days. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should all self-isolate starting from the day the individual's symptoms started and the next 10 full days; if a child or member of staff is not experiencing symptoms but has tested positive for Covid-19, they must self-isolate starting from the day the test was taken and the next 10 full days. If symptoms develop during this isolation period, then they must restart the 10 day isolation from the day after symptoms developed. Others in	Send out an updated copy of the Pupils, Parents and Staff Expectations. * In addition, if any staff or pupils test positive for Covid-19, public health may advise us to ask pupils to get tested and isolate with a wider range of symptoms, including: headache, diarrhoea, severe fatigue and sore throat. PHE has advised that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (Covid-19). Anyone with coronavirus (Covid-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital unless advised to do so. Cumbrian Schools: Telephone the Cumbria Covid-19 Call Centre if we have a positive case of coronavirus in school (staff or pupils). Do NOT give this Tel No. to parents/non-staff. Any queries about a suspected case to be emailed to: EducationIPC@cumbria.gov.uk (inbox monitored by CCC Public Health team Monday to Friday).	Low



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Those with Covid-19 symptoms or who have received a positive Covid-19 test result may be able to end their self-isolation period before the end of the 10 full days (stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection): They can take an LFD test from 6 days after the day the symptoms started (or the day the PCR test was taken if they did not have symptoms), and another LFD test on the following day (day 7). The second LFD test should be taken at least 24 hours later. If both these test results are negative, and they do not have a high temperature, they may end their self-isolation after the second negative test result. After each test, the results must be reported via the national test and trace online system. They should not take an LFD test before the 6th day of their isolation period and should only end their self-isolation following 2 consecutive negative LFD tests which should be taken at least 24 hours apart. Individuals should stop testing after they have had 2 consecutive negative test results. If they take an LFD test from the 6th day of their isolation period, and the test result is positive, they must wait 24 hours before they take the next test. If this LFD test result is positive, they must complete the 10 day self-isolation period. Those who leave self-isolation on or after day 7 are strongly advised to limit close contact with other people in crowded or poorly ventilated spaces, work from home if possible, minimise contact with anyone who is at higher risk of severe illness if infected with Covid-19 and follow the guidance on how to stay safe and help prevent the spread until 10 full days from when their self-isolation period started. Even if someone has tested positive for Covid-19 within the last 90 days, they are strongly encouraged to take part in LFD testing on-site through ATS or at home once they have completed their isolation period for their prior infection. (DfE dai	Non Cumbrian Schools/any school: Contact the DfE Helpline: 0800 046 8687 & select Option 1 for advice on the action to take in response to a positive case. If, following triage, further expert advice is required the adviser will escalate the school's call to the local health protection team who will provide definitive advice on who must be sent home. A small supply of fluid-resistant surgical face masks should be available Measures are in place to reduce the number of close contacts that any pupil will have, including timetabling in year groups where possible, scheduling lunch and break times in year groups and closing the Locker room.	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 testing at parental or guardian discretion). If both these test results are negative, and the child does not have a high temperature, they may end their self-isolation after the second negative test result and return to school from day 8. While testing, if you are still positive on day 10, you can come out of isolation but can only return to environments where you can distance. If you cant distance you must stay at home until you test negative with a single test or day 14. If one of the boarding pupils, show symptoms, they should usually self-isolate in their residential setting so that their usual support can continue, others may then benefit from self-isolating in their family home. For everyone with symptoms, they should avoid using public transport and, wherever possible, be collected by a member of their family or household. A pupil awaiting collection, at Browhead will wait at the rear canopy, at Elleray in the entrance portico. They are to be supervised by a member of staff at all times Appropriate PPE should also be used if close contact is necessary, further information on this can be found in the use of PPE in education, childcare and children's social care settings guidance. Any rooms they use should be cleaned after they have left. The household (including any siblings) should follow the PHE stay at home guidance for households with possible or confirmed coronavirus (COVID-19) 	Refer to: Secondary schools and colleges document sharing platform, Early years and primary schools document sharing platform and Rapid asymptomatic testing in specialist settings (from Step 4). Separate Risk Assessments are available on the KAHSC website: Lateral Flow Device (LFD) testing in Secondary/Special Schools and LFD testing in primary and maintained nursery schools	
		 Close Contacts, will be identified on a case by case basis. A contact is a person who has been close to someone who has tested positive for Covid-19. A person can be a contact any time from 2 days before the person who tested positive developed their symptoms (or, if they did not have any symptoms, from 2 days before the date their positive test was taken), and up to 10 days after, as this is when they can pass the infection on to others. A risk assessment may be undertaken to determine this, but a contact can be: anyone who lives in the same household as another person who has Covid-19 symptoms or has tested positive for Covid-19; anyone who has had any of the following types of contact with someone who has tested positive for Covid-19: 	Refer to PCR test kits for schools and further education providers. School-held PCR test kits should only be offered in the exceptional circumstance an individual becomes symptomatic and you believe they may have barriers to accessing testing elsewhere.	



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		 face-to-face contact including being coughed on or having a face-to-face conversation within 1m been within 1m for 1 minute or longer without face-to-face contact been within 2m of someone for more than 15 minutes (either as a one-off contact, or added up together over one day) A person may also be a close contact if they have travelled in the same vehicle or plane as a person who has tested positive for Covid-19. 		
		Asymptomatic testing Testing remains important in reducing the risk of transmission of infection within		
		schools. That is why, whilst some measures are relaxed, others will remain, and if necessary, in response to the latest epidemiological data, we all need to be prepared to step measures up or down in future depending on local circumstances.		
		• Year 7 and above: Pupils should continue to test twice weekly at home, with lateral flow device (LFD) test kits, 3-4 days apart and more frequently if they are specifically asked to do so, such as in the event of an outbreak. Testing remains voluntary but is strongly encouraged.		
		All Campuses: Staff should continue to test twice weekly at home with LFD test kits, 3-4 days apart and more frequently if they are specifically asked to do so, such as in the event of an outbreak. There is no need for primary age pupils (those in year 6 and below) to test. Testing remains voluntary but is strongly encouraged.		
		Browhead: We will also retain a small asymptomatic testing site (ATS) on-site until further notice so they can offer testing to pupils who are unable to test themselves at home.		
		We will ask parents and other visitors to take a lateral flow device (LFD) test before entering the school. Confirmators BOD tests following a positive lateral flow device (LFD) test possitive lateral flow devices (LFD) test possitive		
		Confirmatory PCR tests following a positive lateral flow device (LFD) test result are to be temporarily suspended from Tuesday 11 January. This will mean that anyone who receives a positive LFD test result will be required to self-isolate immediately and will not be required to take a confirmatory PCR test.		



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
An individual has been identified as a close contact of a positive Covid-19 case	High	 From Tuesday 14/12/21, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with Covid-19 (regardless of the variant) are strongly advised to take an NHS rapid lateral flow test every day for 7 days before they leave the household and continue to attend their setting as normal, unless they have a positive LFD test result. 	Refer to: Guidance for contacts of people with confirmed coronavirus (COVID-19) infection who do not live with the person	
		 Household contact – 7 consecutive days or until the household member who has Covid-19 reaches the end of their self-isolation period if this is earlier. Non-household contact – 7 consecutive days or until 10 days after their last contact with the person who tested positive if this is earlier. Daily testing of close contacts applies to all contacts who are: 		
		 fully vaccinated adults – people are fully vaccinated 14 days after having received the 2nd dose of an approved vaccine or one dose of the single-dose Janssen vaccine. all children aged 5 to 18 years and 6 months, regardless of their vaccination status people who are not able to get vaccinated for medical reasons people taking part, or have taken part, in an approved clinical trial for a 	Refer to: <u>Use of the NHS COVID-19 app</u> in schools and FE colleges	
		Covid-19 vaccine • Under 5s are exempt from self-isolation and do not need to take part in daily		
		rapid lateral flow testing. (See advice below for Cumbrian Schools in relation to under 5's).		
		Anyone whose rapid LFD test comes back positive or who develops Covid-19 symptoms should self-isolate immediately. They do not need to continue taking rapid tests during that 10 day isolation period.		
		Daily LFD testing is not mandatory; only strongly advised. If individuals are eligible for daily LFD testing but cannot access test kits or do not want to do it, they will not be required to self-isolate instead.		
		 Adults who are fully vaccinated and children between the ages of 5 and 18 years + six months who are currently isolating due to being a contact of someone that 		



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Risks		has tested positive for the Omicron variant, will be able to switch over the daily testing instead. • Anyone identified as a contact with a negative rapid lateral flow result is strongly advised to: - limit close contact with other people outside their household, especially in enclosed spaces; - wear a face covering in enclosed spaces and where they are unable to maintain social distancing unless exempt ; - limit contact with anyone who is clinically extremely vulnerable; - continue to practice good hand/respiratory hygiene; - take part in twice weekly LFD testing.		
		 Pupils with SEND identified as close contacts should be supported by the school and their families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing. For further information please see SEND quidance. There is no need for primary age pupils (those in year 6 and below) to regularly test, unless they have been identified as a contact for someone who has tested positive for Covid-19 and therefore advised to take lateral flow tests every day for 7 days. (See advice below for Cumbrian Schools in relation to primary school pupils). Unvaccinated adults are not eligible for this new daily testing policy, they must isolate immediately seek a PCR test and self-isolate for 10 days if they are a contact of someone who tests positive for Covid-19 (regardless of the variant). At Windermere School, we are choosing to pause the use of the track and trace App on site and to use our own timetable, attendance register and case by case assessment to identify close contacts. We 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 school or if central government offers the area an enhanced response package, a Director of Public Health might advise us to temporarily reintroduce some control measures. 		



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
Clinically vulnerable or extremely clinically vulnerable persons returning to school	High	 Pupils who are clinically extremely vulnerable (CEV) All CEV children and young people should attend their education setting unless they are one of the very small number of children and young people under pediatric or other specialist care who have been advised by their clinician or other specialist not to attend. We will provide remote education to pupils who are following public health advice. 	Refer to RCPCH: COVID-19 guidance on CEV children & young people and DFE: Supporting pupils at school with medical conditions	Low
3011001		 As normal, we will engage with our local immunisation providers to provide routine immunisation programmes on site, ensuring these will be delivered in keeping with the school's control measures. 		
		 School workforce School Staff have all had the opportunity to be vacinated and anyone who has chosen not to be vaccinated will be offered an individual risk assessment to provide safe systems of work. We will discuss any concerns individuals including those who may be clinically extremely vulnerable, clinically vulnerable or at increased comparative risk from coronavirus, may have around their particular circumstances, reassure staff about the protective measures in place and review their specific Individual Risk Assessments with them. Staff who are extremely clinically vulnerable (CEV) 	Refer to COVID-19: guidance on protecting people defined on medical grounds as extremely vulnerable, HSE: Protect vulnerable workers during the coronavirus (COVID-19) pandemic & Talking with your workers about preventing coronavirus (COVID-19)	
		 Clinically extremely vulnerable (CEV) people are advised, as a minimum, to follow the same guidance as everyone else. CEV people may wish to think particularly carefully about the additional precautions they can continue to take. Social distancing measures have now ended in the workplace and it is no longer necessary for the government to instruct people to work from home. We will explain the measures we have in place to keep CEV staff safe at work. 	See also Coronavirus (COVID-19): advice for pregnant employees, RCOG: Coronavirus (COVID-19) infection & pregnancy and COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding	
		 Staff who are pregnant We will conduct a risk assessment for new and expectant mothers in line with the Management of Health and Safety at Work Regulations 1999 (MHSW). Any risks 		



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		 identified at that point, or later during the pregnancy, in the first 6 months after birth, or while the employee is still breastfeeding, will be included and managed as part of the general workplace risk assessment. We will follow the Royal College of Obstetricians and Gynaecology (RCOG) guidance and continue to monitor for future updates to it. Women less than 28 weeks pregnant with no underlying health conditions: We will conduct a workplace risk assessment with each person and occupational health team. They will only continue working if the risk assessment advises that it is safe to do so. This means that we will remove or manage any risks. If this cannot be done, they will be offered suitable alternative work or working arrangements (including working from home) or be suspended on normal pay. We will support each person with appropriate risk mitigation in line with recommendations to staff arising from workplace risk assessment. 	Where necessary, we will provide equipment for people to work at home safely and effectively and guidance on how to work safely at home – refer to the ACAS Home Working Guide, ACAS Example checklist for setting up homeworking and the HSE: protect home workers	
		 Women who are 28 weeks pregnant and beyond or with underlying health conditions: Women 28 weeks pregnant and beyond or are pregnant and have an underlying health condition should take a more precautionary approach. This is because although they are at no more risk of contracting the virus than any other non-pregnant person who is in similar health, they have an increased risk of becoming severely ill and of pre-term birth if they contract Covid-19. We will ensure they are able to adhere to any active national guidance on social distancing. For many workers, this may require working flexibly from home in a different capacity. We will consider how to redeploy these staff and how to maximise the potential for homeworking, wherever possible. Where adjustments to the work environment and role are not possible and alternative work cannot be found, such persons will be suspended on paid leave. 	Refer to Schools and COVID-19: guidance for BAME staff and their employers and NHS: information available on who is at higher risk from coronavirus	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Staff who may otherwise be at increased risk from coronavirus Some people may be at comparatively increased risk from coronavirus (Covid-19). Staff who feel they may be at increased risk but who have not been identified as CEV can return to school. We will review their individual risk assessments with them (as above). 		
Students returning from abroad	High	 Travelling from non-red list countries The rules for people entering England from abroad have recently been updated. Boarding students who are travelling from a non-red list country should follow the guidance for their relevant age group and vaccination status if aged 18 or over, in the guidance Travel to England from another country during coronavirus (COVID-19). All boarding students must complete a passenger locator form. Boarding students aged 12 years or over, regardless of vaccination status, must take a PCR or Lateral Flow COVID-19 test before they travel to England from outside the common travel area. This is known as a pre-departure test. The test must be taken in the 2 days before their travel service to England is scheduled to depart. If the journey to England is a multi-leg journey, boarding school students must take the test in the 2 days before the start of the first leg of travel. Further testing may be required, based on the country of origin and guidance will be assessed at the time by the parents and school to work with in the latest procedures. Travel to boarding school Students will be met at the airport by school representatives and be transported directly to their boarding facility to isolate. Private Transport, School minibus, private car or taxi is to be chosen rather than public transport. Quarantine in school boarding facilities For the purposes of quarantine, a mainstream boarding school is usually considered a 'household'. 	Refer to Boarding school students from red list countries quarantine arrangements, Unaccompanied minors arriving from a red list country to attend boarding school and * above	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		Each household should occupy part of the school site which is separated from the parts of the site used by other households for isolation and quarantine purposes and areas used by other staff and students.		
		Residential facilities used for quarantine		
		 Rooms should have individual ventilation systems (e.g. room or window fan coil units that do not recirculate to other parts of the building) or windows that open (safely). Alternatively, we have a non-recirculating ventilation system that permits redirection of the air flow from areas outside the area in which a household is quarantining into the area in which a household is quarantining. We will put in place Covid secure arrangements to bring meals and other essential commodities, such as toiletries, to the area where quarantine is occurring. We will put in place Covid secure arrangements for cleaning rooms, changing bedding, handling laundry and disposing of waste. We will ensure quarantining red list households use separate bathrooms from the rest of the school and ensure all boarding school students have their own individual towels, both for drying after bathing or showering and for hand-hygiene purposes. 		
		Supervising and supporting boarding school students during quarantine		
		 We will provide appropriate information to students about how they need to behave while in quarantine and how they will access services and can contact staff when help is required. We will: 		
		 ensure students follow the guidance on how to quarantine when they arrive in England; Offer access to remote access education. ensure students are supervised such that there is no opportunity to leave their household area, except where carefully supervised to ensure no contact with individuals from outside their household and staff responsible for the supervision and care of the household; 		



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		 put in place arrangements for the oversight of students in quarantine that protect the safety and welfare of all students and staff, minimising the school staff who interact with the boarding school students; provide students with clear rules as to what is expected and acceptable during their quarantine period including a clear statement of the area that the boarding school students are allowed to occupy (e.g. an area including their room and toilet/bathroom facilities that are for the use of red list quarantining boarding school students and no-one else); provide students with as much information as will be helpful for them to understand the practicalities of being in quarantine such as arrangements for meals, room cleaning, disposing of rubbish, laundry, process for requesting and enjoying outdoor exercise and emergency procedures. Rules and information will be provided verbally and in writing; provide alcohol gel for each student, with advice on how to use the gels and the risk of ingestion and flammability of the gel; have procedures in place, agreed in advance with parents, setting out what it will do in the case of an emergency. 		
		We will also put in place appropriate arrangements for the collection and treatment of laundry and waste from each quarantining household. This should prevent unnecessary contact between staff and members of the household. These arrangements will include:		
		 staff will wear appropriate PPE (masks, aprons, gloves, eye protection etc.) when handling laundry from quarantining boarding school students. Laundry will be treated as infectious and double bagged, will be tagged with the care area and date, and stored in a designated, safe lockable area while awaiting laundering. Hot wash at 60°C; all consumable waste items that have been in contact with quarantining students, including used tissues, will be put in a plastic rubbish bag, double bagged and tied. This will be disposed of with normal household rubbish after a wait of 24 hours. 	The Government currently requires that face coverings are worn in enclosed and crowded spaces e.g. in shops and many other public places (see	



Exercise and fresh air

Students may leave the place in which they are quarantining for exercise only
under staff supervision. School staff will ensure that students within a
quarantining household do not come into contact with any individuals from
outside the students' household or staff supervising and providing care to their
household.

Testing boarding school students

• A boarding school student's arrival date in England is counted as day 0. Testing must take place on or before day 2 and on or after 8.

Visitors to boarding school students in quarantine

Boarding school students in quarantine from red list countries will not receive
visitors, except in exceptional circumstances. If it is necessary for social workers,
other children's social care staff, medical staff or other professionals to engage
with a child they should consider in the first instance if this can be done so
remotely and where this is not possible or appropriate, they should follow the <u>Use</u>
of PPE in education, childcare and children's social care settings including AGPs
when making any unavoidable visits.

Leaving quarantine under exceptional circumstances

- Students must not leave the place where they are quarantining until their quarantine has ended (see below), except in very limited circumstances. The Head teacher, or in their absence, the Deputy Head Pastoral is responsible for making a decision about when this is appropriate. The Head teacher will only allow the student to leave the school under limited circumstances, e.g.:
 - if there is a legal obligation for the student to leave e.g. to attend court;
 - to seek medical assistance where this is required urgently or on the advice of a registered medical practitioner;
 - to avoid injury, illness or escape a risk of harm e.g. situations such as fire or flooding or where there is a risk of abuse;
 - to access critical public services including social services or services provided to victims e.g. critical access such as for a child to see their social worker.

Refer to <u>COVID-19</u>: cleaning in nonhealthcare settings outside the home



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		In the case of some of the other grounds (related to exercise, visiting a person who appears to be dying and attendance at a funeral), prior permission ("a required prior permission") needs to be given by a person authorised by the Secretary of State. Where appropriate, the DfE has written or will write to schools granting authorisations to give required prior permissions.		
		Ending Quarantine		
		 If a boarding school student has quarantined for 10 full days (the day of arrival in England is day 0), received a negative result to both the day 2 and day 8 tests and does not have symptoms of Covid-19, they may leave the place where they are quarantining, unless anyone in their household has symptoms or has tested positive. If any household member receives a positive Covid-19 test, they and their household must extend the quarantine period for a further 10 days (the new day 0 is the day the household member developed symptoms or tested positive). If 		
		additional household members test positive, the household must restart the quarantine period again. The only people who do not have to restart their quarantine when someone tests positive are household members who have already tested positive during the quarantine period. If a household member has already tested positive during the quarantine period, they need to complete their restarted 10 days and do not need to extend their quarantine again if they or someone else tests positive.		
		If a boarding school student has not taken a day 8 test or the results of this test have not arrived, they must quarantine for 14 full days, or until the delayed test arrives, if sooner (where day 0 is the day of arrival). The entire household must		
		 also quarantine for the full quarantine period. If the boarding school student has not received their day 8 test, or they need help with their order, they should contact the helpline provided in the booking portal guidance. 		
		 <u>quidance</u>. Once quarantine is over, boarding school students are no longer required to meet the restrictions set out in this guidance. However, schools should continue to 		



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		manage all boarding school students in line with the <u>Actions for schools during</u> the coronavirus outbreak.		
Inadequate hand and respiratory hygiene leading to spread of Covid-19 virus	High	 Frequent and thorough hand cleaning is now regular practice. We will continue to ensure that pupils clean their hands regularly with soap and water or hand sanitiser including before leaving home, on arrival at school, on return from breaks, when they change rooms and before and after handling cleaning chemicals, eating/drinking, using the toilet, sports activities, using public transport and after coughing or sneezing and not to touch face (eyes, mouth, nose) with hands that are not clean. Wash with liquid soap & water for a minimum of 20 seconds. Alcohol based hand cleansers/gels (containing at least 60% alcohol) can be used if soap and water are not available or practical. We will continue to ensure there are sufficient hand washing or hand sanitiser 'stations' available throughout school for staff and pupils and at the main entrance and dining hall entrance. We will ensure supervision of hand sanitiser use given the risks around ingestion. Young children and pupils with complex needs will continue to be helped to clean their hands properly - songs and rhymes will be used to encourage hand washing in early years. Skin friendly skin cleaning wipes can be used as an alternative. Toilets will be cleaned regularly and pupils encouraged to clean their hands thoroughly after using the toilet. The 'catch it, bin it, kill it' approach will continue. Everyone will be reminded to sneeze into a tissue or sleeve NEVER into hands and to wash hands immediately after (as above). 'Catch it, bin it, kill it' posters to be displayed in relevant areas. Used tissues will be put in a bin immediately - all waste bins to be lined (they do NOT need to be double lined) and should be lidded and foot operated where possible and emptied regularly. As with hand cleaning, we will ensure younger children and those with complex needs are helped to get this right, and all pupils understand that this is now part of how school operates. Some pupils with complex needs will	We have built these routines into school culture, supported by behaviour expectations. We will ensure there are enough tissues and bins available to support pupils and staff to follow the 'Catch it, bin it, kill it' routine The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage good hand and respiratory hygiene Refer to HSE: First aid during Covid-19	Low



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 these pupils and the staff working with them – they will be given more opportunities to wash their hands. Where it is necessary for first aid to be administered in close proximity, treating any casualty properly should be the first concern. Those administering it should pay particular attention to sanitation measures immediately afterwards, including washing hands. 		
Inadequate ventilation leading to spread of Covid-19 virus		When school is in operation, it is important to ensure the building is well ventilated and a comfortable teaching environment is maintained. We are futunate enough to have lots of open air spaces and can easily open windows to deliver fresh air flow in all areas, When holding events where visitors such as parents are on site, e.g. school plays and parents evenings, windows and Fire doors will be kept open, where safe to do so.	Refer to the HSE: Ventilation & air conditioning during the coronavirus (COVID-19) pandemic and CIBSE coronavirus (COVID-19) advice	
		 To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures will 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; rearranging furniture where possible to avoid direct drafts. 		
Inadequate personal protection & PPE & spread of Covid-19 virus	High	 We have reviewed tasks in school which require PPE like first aid, intimate care, cleaning, food preparation etc. and identified where we need extra equipment like visors or more of it because we change it more often. Where PPE is required, staff have been trained in and must scrupulously follow the guidance how to put PPE on and take it off safely to reduce cross and self-contamination. Most staff will not require PPE beyond what they would normally need for their work. Where a child or young person already has routine intimate care needs that involve the use of PPE, the same PPE will continue to be used. Additional PPE is only needed in a very small number of scenarios, including: 	Refer to: Use of PPE in education, childcare and children's social care settings including AGPs Ensure adequate bins (lidded and foot operated where possible) and tissues are made available. Ensure school has a stock of rubber gloves and if needed, disposable gloves/aprons/facemasks.	Low



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 where an individual child or young person becomes ill with coronavirus (Covid-19) symptoms and only then if close contact is necessary; when driving a School vehicle with pupils as passengers, when a mask must be worn by all; driver and passengers. 		
		Depending on how close you need be to an individual with Covid-19 symptoms you may need the following PPE:		
		 fluid-resistant surgical face masks (also known as Type IIR) disposable gloves disposable plastic aprons eye protection (for example, a face visor or goggles) 		
		How much PPE you need to wear when caring for someone with symptoms of Covid-19 depends on how much contact you have:		
		 A face mask should be worn if you are in face-to-face contact. If physical contact is necessary, then gloves, an apron and a face mask should be worn. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the eye, e.g. from coughing, spitting or vomiting. 		
		When changing children, and where the child can understand, ask the child to turn their head to the side during the changing process.		
		Face Coverings		
		The Government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where individuals may come into contact with people they don't normally meet this includes public transport and dedicated transport to school.	Refer to HSE Face Fit Testing Guidance	
		• From January 2022, face coverings are strongly advised for Senior School pupils, Year 7 and above, in indoor settings such as classrooms and corridors. Teaching Staff are not required to wear a mask while at the front of the class but are advised to when moving through the classroom. Staff and visitors are required to	A displayed poster which the children can describe may assist with this.	
		wear masks in indoor communal areas.	Ensure there is a small supply of face coverings available in school	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They will only be used after carrying out a risk assessment for the specific situation and will always be cleaned appropriately. We will make reasonable adjustments for disabled pupils to support them to access education successfully. Where appropriate, we will discuss with pupils and parents the types of reasonable adjustments that are being considered to support an individual. No pupil or student will be denied education on the grounds of whether they are, or are not, wearing a face covering. Children under the age of 3 should not wear face coverings. 		
Inadequate cleaning measures leading to	High	Cleaning non-healthcare settings where no-one has symptoms of, or confirmed Covid-19 Cleaning and disinfection	Refer to PHE COVID-19: cleaning of non-healthcare settings outside the home	Low
spread of Covid-19 virus		 We will reduce clutter and remove difficult to clean items to make cleaning easier. Increase the frequency of cleaning, using standard cleaning products such as detergents and bleach, paying attention to all surfaces but especially ones that are touched frequently, such as door handles, light switches, work surfaces, remote controls and electronic devices. As a minimum, frequently touched surfaces should be wiped down twice a day, and one of these should be at the beginning or the end of the working day. Cleaning should be more frequent depending on the number of people using the space, whether they are entering and exiting the setting and access to handwashing and hand-sanitising facilities. Cleaning of frequently touched surfaces is particularly important in bathrooms and communal kitchens. When cleaning surfaces, it is not necessary to wear personal protective equipment (PPE) or clothing over and above what would usually be used. 	Carry out inventory check of cleaning products and stock at regular intervals. Ensure contingency plans are in place to respond to any shortages in supply.	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		Class Teachers and office staff will support the cleaning team by taking responsibility for cleaning tehir own desks, workstation, devices and phones.		
		Laundry		
		 Items should be washed in accordance with the manufacturer's instructions. There is no additional washing requirement above what would normally be carried out. 		
		Kitchens and communal canteens		
		• It is very unlikely that Covid-19 is transmitted through food. However, as a matter of good hygiene practice, anyone handling food will wash their hands often with soap and water for at least 20 seconds before doing so.		
		 Crockery and eating utensils should not be shared. Clean frequently touched surfaces regularly. 		
		Catering staff will continue to follow the Food Standard Agency's (FSA) guidance on good hygiene practices in food preparation, Hazard Analysis and Critical Control Point (HACCP) processes, and preventative practices (pre-requisite programmes (PRPs)).		
		Bathrooms		
		 Clean frequently touched surfaces regularly. Ensure suitable hand washing facilities are available including running water, liquid soap and paper towels or hand driers. Where cloth towels are used, these should be for individual use and laundered in accordance with washing instructions. 		
		Waste		
		 Waste does not need to be segregated unless an individual in the setting shows symptoms of or tests positive for Covid-19 (see below). 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. 		



Cleaning after an individual with symptoms of, or confirmed Covid-19 has left the setting or area

Refer to Coronavirus (Covid-19): Disposing of waste

Personal protective equipment (PPE)

- The minimum PPE to be worn for cleaning an area after a person with symptoms of or confirmed Covid-19 has left the setting is disposable gloves and an apron.
- Wash hands with soap and water for 20 seconds after all PPE has been removed.
- If a risk assessment of the setting indicates that a higher level of virus may be present (e.g. where someone unwell has spent the night such as in a hotel room or boarding school dormitory) then additional PPE to protect the cleaner's eyes, mouth and nose may be necessary. The local Public Health England (PHE) Health Protection Team can advise on this.

Cleaning and disinfection

- Public areas where a symptomatic person has passed through and spent minimal time but which are not visibly contaminated with body fluids, such as corridors, can be cleaned thoroughly as normal.
- All surfaces that the symptomatic person has come into contact with should be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as bathrooms, door handles, door push plates, work surfaces, computer keyboards/mice, telephones, grab rails in corridors/bannisters, stairwells.
- Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction. Use one of the options below:
 - a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm av.cl.); or
 - a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants; or
 - if an alternative disinfectant is used within the organisation ensure that it is effective against enveloped viruses.
- Avoid mixing cleaning products together as this can create toxic fumes.
- Avoid creating splashes and spray when cleaning.



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below. When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used. 		
		 Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items. To minimise the possibility of dispersing virus through the air, do not shake dirty laundry prior to washing. Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above. 		
		Waste		
		 Personal waste from individuals with symptoms of Covid-19 and waste from cleaning of areas where they have been (including PPE, disposable cloths and used tissues): 		
		 should be put in a plastic rubbish bag and tied when full the plastic bag should then be placed in a second bin bag and tied this should be put in a suitable and secure place and marked for storage until the individual's test results are known 		
		This waste should be stored safely and kept away from children. It should not be placed in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours. If possible keep an area closed off and secure for 72 hours.		
		If the individual tests negative, this can be disposed of immediately with the normal waste.		
		If Covid-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste.		



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 If during an emergency you need to remove the waste before 72 hours, it must be treated as Category B infectious waste. You must: keep it separate from your other waste arrange for collection by a specialist contractor as hazardous waste There will be a charge for this service. Other household waste can be disposed of as normal. Any items that are heavily contaminated with body fluids and cannot be cleaned by washing will be disposed of. 		
Failure to adequately identify vulnerable pupils/ safeguarding	High	 We will continue to have regard to statutory guidance Keeping Children Safe in Education. We will review our Child Protection Policy (led by the DSL) to reflect that some children may require remote education due to self-isolation for example. There is no change to local multi-agency safeguarding arrangements, which remain the responsibility of the three safeguarding partners (local authorities, clinical commissioning groups and chief officers of police). All local safeguarding partners will remain vigilant and responsive to all safeguarding threats and ensure vulnerable children and young people are safe – particularly as some children and young people will be learning remotely due to self-isolation for example. In particular, vulnerable children and those with a social worker are expected to attend provision (subject to public health advice), given their safeguarding and welfare needs. Where vulnerable children do not attend, we will follow up with the parent/carer, working with the LA/social worker (where applicable) to explore the reasons for absence, discussing their concerns; focus discussions on the welfare of the child ensuring they are able to access appropriate support whilst at home; keep the situation under review and maintain contact. The DSL (and deputies) will be provided with more time to help provide support to staff and children regarding any new safeguarding and welfare concerns and the handling of referrals to children's social care and other agencies where these are appropriate. The DSL will be best placed to co-ordinate multi-agency working within a school, including communication with school nurses. 		Low



Hazards & Risk Associated Risks	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
Inappropriate arrangements for opening the school to pupil groups	 Mixing and 'bubbles' At Step 4, it is no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). Bubbles will not need to be used in school from the Autumn term. As well as enabling flexibility in curriculum delivery, this means that assemblies can resume, and we no longer need to make alternative arrangements to avoid mixing at lunch. Our outbreak management plan covers the possibility that in some local areas it may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups. Any decision to recommend the reintroduction of 'bubbles' will not be taken lightly and will need to take account of the detrimental impact they can have on the delivery of education. Dedicated school transport, including statutory provision and the use of school minibuses We no longer need to keep children in consistent groups/bubbles or be responsible for tracing close contacts of those who test positive for Covid-19. The Government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where an individual may come into contact with people they don't normally meet. On dedicated transport children and young people aged 11 and over will be expected to wear a face covering when travelling to school. We will continue to ensure frequent and thorough hand cleaning with soap and running water or hand sanitiser. The 'catch it, bin it, kill it' approach continues to be very important. Fresh air (from outside the vehicle) through ventilation will be maximised, particularly through opening windows and ceiling vents. We will put in place and maintain an appropriate cleaning schedule with a particular focus on frequently touched surfaces. 	Refer to: Dedicated transport to schools and colleges Covid-19 operational guidance	Low



Other considerations

- Pupils with SEND will receive specific help with the changes to routine they are experiencing, so teachers and SENCo's will plan to meet these needs, e.g. using social stories.
- Where a pupil or student has an EHC plan the local authority and (if there is health provision) health commissioning body must secure or arrange the provision specified in the plan.
- At times it may be necessary to conduct some aspects of EHC needs assessments and reviews indifferent ways, e.g. because children or young people are isolating. It is important that the assessments and reviews continue to ensure that the child or young person, and their parent and carer, is at the centre of the process and can engage with the process in a meaningful way.
- As well as the duty to secure or arrange provision in an EHC plan, we must meet all the statutory duties relating to EHC needs assessments and annual reviews. It is important that we co-operate in supporting requests about potential placements, providing families with advice and information where requested.
- Specialists, therapists and other professionals should provide interventions as usual.

Wraparound care provision, holiday clubs and extra-curricular activity including out-of-school sports provision

- All children may access out-of-school settings, wraparound care and extracurricular provision; activities may take in groups of any size and it is no longer recommended that it is necessary to keep children in consistent groups ('bubbles').
- Our outbreak management plans cover the possibility that in some local areas it
 may become necessary to reintroduce 'bubbles' for a temporary period, to reduce
 mixing between groups.
- Our provision will ensure they are following **the same** protective measures being taken by school during the day and work with school to follow our arrangements.
- When caring for children:
- All sports provision, including competition between settings can be planned and delivered. Refer to 'PESSPA' below.

Refer to supporting pupils and students with SEND

DfE Supporting Pupils at School with Medical Conditions remains in place

Refer to COVID-19: Actions for Out of School Settings



Vecociatod	isk	Control Measures	Notes/Additional Control Measures	Residual
	iting	What are we doing now?	What more do we need to explain/do?	Risk
Inappropriate arrangements for managing the curriculum	ligh	 We will follow the same protective measures as listed under 'Music, Dance and Drama' below for these after school activities. Educational visits & trips Out-of-school settings and wraparound childcare providers may undertake educational visits in groups of any number and children will no longer need to be kept in consistent groups. Refer to 'Educational Visits' on Page 18 for further details. [EYFS] Supervised toothbrushing programmes Supervised toothbrushing programmes may be undertaken using the dry brushing method. The wet brushing model is not recommended because it is considered more likely to risk droplet and contact transmission and offers no additional benefit to oral health over dry toothbrushing. Physical Education, School Sport and Physical Activity (PESSPA) All sports provision, including competition between settings can be planned and delivered whilst following the measures in our system of controls. We will follow the guidance contained in Guidance on coronavirus (COVID-19) measures for grassroots sport participants, providers and facility operators. If delivering sporting or other organised events, more information can be found in COVID-19: Organised events guidance. Science, Art and D&T For guidance regarding Science and D&T in relation to practical activities during the Covid-19 pandemic, we will follow relevant CLEAPSS guidance. Although specific risk assessments will not be required, our existing curricular risk assessments will be reviewed and where necessary updated to reflect altered practices and CLEAPSS guidance. 	Refer to: • Guidance on coronavirus (COVID-19) measures for grassroots sport participants, providers and facility operators • Sport England • Youth Sport Trust • Association for Physical Education (AfPE) • Swim England Refer to: CLEAPSS GL344 and GL343	Low



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Music, Dance and Drama We will continue teaching music, dance and drama as part of the school curriculum. Singing, wind and brass instrument playing can be undertaken in line with performing arts guidance ensuring we provide adequate ventilation and clean more frequently. Performances If planning indoor or outdoor face-to-face performances, sporting or other organised events in front of a live audience, we will follow the latest advice in the COVID-19: Organised events guidance, which provides details of how to manage audiences as well as carry out performing arts safely. 	Refer to Working safely during COVID- 19 in events and attractions including performing arts	
Inadequate contingency plans in place	High	 Stepping measures up and down We have outbreak management plans outlining how we will operate if there were an outbreak in our school allowing us to move to remote learning. If we have several confirmed cases within 14 days, we may have an outbreak. We will call the LA Public Health Team who will advise if any additional action is required, such as implementing elements of our outbreak management plan. Remote education Not all people with Covid-19 have symptoms. Where appropriate, we will support those who need to self-isolate because they have tested positive to work or learn from home if they are well enough to do so. We will maintain our capacity to deliver high quality remote education for next academic year, including for pupils who are abroad, and facing challenges to return due to Covid-19 travel restrictions, for the period they are abroad, meeting the Independent School Standards in full at all times. 	Refer to: Get help with remote education Keeping children safe online Adapting teaching practice for remote education Review your remote education provision Get help with technology for remote education during coronavirus (Covid-19) Remote education good practice guide Support for parents and carers to keep children safe online	LOW



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 We will work collaboratively with families and put in place reasonable adjustments so that pupils with SEND can successfully access remote education. We will keep in contact with students learning from home and regularly check if they are accessing remote education. Our Offer of Remote Education is available to all pupils/parents and is displayed on the school website. 		
Poor or inappropriate behaviour and attendance	High	 Our Behaviour policy has been updated with any new rules/policies and will be communicated clearly and consistently to staff, pupils and parents, setting clear, reasonable and proportionate expectations of pupil behaviour both in school and online. We will set out clearly the consequences for poor behaviour and deliberately breaking the rules and how we will enforce those rules including any sanctions. We will work with staff, pupils and parents to ensure that behaviour expectations are clearly understood, and consistently supported, taking account of individual needs and we will also consider how to build new expectations into our rewards system. It is likely that adverse experiences and/or lack of routines of regular attendance and classroom discipline may contribute to disengagement with education upon return to school, resulting in increased incidence of poor behaviour. We will work with those pupils who may struggle to re-engage in school and are at risk of being absent and/or persistently disruptive, including providing support for overcoming barriers to attendance and behaviour and to help them reintegrate back into school life. Any disciplinary exclusion of a pupil, even for short periods of time, must be consistent with the relevant legislation. This includes sending a pupil home for poor behaviour, whether or not remote education is provided. 'Informal' or 'unofficial' exclusions, such as sending pupils home 'to cool off' for part of the day are unlawful, regardless of whether they occur with the agreement of parents or carers. We will be mindful that it is unlawful to punish a child for the actions of their parents and will consider this when applying sanctions. 	Refer to the DfE Checklist for school leaders to support full opening: behaviour and attendance Refer to: Changes to the school suspension and permanent exclusion process during the coronavirus (COVID-19) outbreak	Low



Attendance

- School attendance is mandatory for all pupils of compulsory school age and it is priority to ensure that as many children as possible regularly attend school.
- Where a child is required to self-isolate or quarantine because of Covid-19 in accordance with relevant legislation or guidance published by PHE or the DHSC they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of Covid-19 they will be recorded as code I (illness).
- For pupils abroad who are unable to return, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply.
- We will continue to clearly and consistently communicate the expectations around school attendance to families and any other professionals who work with the family. Any discussions will have a collaborative approach, focusing on the welfare of the child or young person and responding to the concerns of the parent, carer or young person. This conversation is particularly important for children with a social worker.

Term time holidays

- As restrictions begin to lift, some families may be looking to take holidays. As usual, parents should plan their holidays around school breaks and not take their children out of school on holiday during term time.
- Where a parent wishes to take their child out of school for whatever reason, the
 onus is on them to apply for a leave of absence and demonstrate why they
 believe the circumstances are exceptional. Schools make decisions on granting
 leave of absence but will not normally do so for a holiday.

Travel & quarantine

• Where pupils travel from abroad to attend Windermere School, we will explain the rules to pupils and their parents before they travel to the UK. All pupils travelling to England must adhere to <u>travel legislation</u>, details of which are set out in <u>government travel advice</u>. Additional guidance has been issued on the <u>quarantine arrangements for boarding school pupils travelling from red-list</u> countries to attend a boarding school in England.

Refer to school attendance guidance

Refer to the model <u>Isolation for Boarding</u> Schools during Coronavirus (Covid-19) Pandemic Risk Assessment



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		Parents travelling abroad should bear in mind the impact on their child's education which may result from any requirement to quarantine or isolate upon return.		
Inadequate arrangements in place for managing off- site visits	High	 We will continue to 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. Given the likely gap in Covid-19 cancellation insurance, if we are considering booking a new visit, whether domestic or international, we will ensure that any new bookings have adequate financial protection in place. From the start of the autumn term, we can go on international visits that have previously been deferred or postponed and organise new international visits for the future. We will be aware that the travel list (and broader international travel policy) is subject to change and green list countries may be moved into amber or red. 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. We will speak to either our visit provider, commercial insurance provider, the Risk Protection Arrangement (RPA) to assess the protection available. If unsure contact organisations such as the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI) for independent advice on insurance cover and options. Any school holding ATOL or ABTA refund credit notes may use these credit notes to rebook educational international visits. 	Refer to the health and safety guidance on educational visits and specialist advice from the Outdoor Education Advisory Panel (OEAP)	
Inadequate staffing ratios, staff availability and recruitment	High	 Ratios and Qualifications We will undertake an appropriate audit to ensure staffing levels are appropriate. We have contingency plans in place should staff be absent as a result of Covid-19. Our possible approaches to managing a shortfall in staffing include: We will ensure that appropriate support is made available for pupils with SEND, e.g. 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. 		Low

Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Where support staff capacity is available, we will consider using this to support catch-up provision or targeted interventions. TAs may also be deployed to lead groups or cover lessons, under the direction and supervision of a qualified, or nominated, teacher. Any redeployments will not be at the expense of supporting pupils with SEND. The Head teacher will be satisfied that the person has the appropriate skills, expertise and experience to carry out the work, and discuss and agree any proposed changes in role or responsibility with the member of staff. This includes ensuring that safe ratios are met, and/or specific training undertaken, for any interventions or care for pupils with complex needs where specific training or specific ratios are required. We can continue to engage supply teachers and other supply staff including to deliver face to face education to pupils in school and remote education. Where it is necessary to use supply staff, peripatetic teachers and volunteers, they will be expected to comply with our arrangements for managing and minimising risk and will be included in our communications, policies and processes for asymptomatic testing including provision of test kits where feasible. 		
		 We will ensure we have adequate and appropriate equipment and facilities to give first aid to any employee or pupil who is injured or becomes ill at work; the level of first aid cover provided remains appropriate for our work environment and the level of first aid provision necessary in high risk settings is fully maintained. We will ensure sufficient Paediatric First Aid Trained staff are available when EYFS children are present on site or on school trips. The key telephone numbers of all available DSL's are shared with all staff working in the School. We will ensure the contact details of the Safeguarding Hub/Early Help Team/LADO are available to all staff on duty. We will have sufficient competent staff on duty to administer or supervise the administration of medication. Wherever possible, children to self-administer, witnessed by staff. 	Where it is not possible to have a DSL or Deputy physically in school, arrangements may be made for the DSL to be contactable via phone or video link if working from home.	



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 Staff taking leave Staff will need to be available to work in school during term time. We will discuss leave arrangements with staff to inform workforce planning taking into account their individual contractual arrangements. There is a risk that where staff travel abroad, their return travel arrangements could be disrupted due to Covid-19 restrictions and they may need to quarantine on their return. Where it is not possible to avoid a member of staff having to quarantine during term time, we will consider if it is possible to temporarily amend working arrangements to enable them to work from home. Recruitment Recruitment will continue as usual. We will continue to adhere to Keeping children safe in education regarding pre-appointment checks. 	The latest guidance on travel/quarantine can be accessed at: Travel abroad from England during coronavirus (COVID-19), Quarantine and testing if you've been in an amber list country, Coronavirus (COVID-19) testing before you travel to England, Booking and staying in a quarantine hotel when you arrive in England, Red, amber and green list rules for entering England	
Visitors & spread of Covid-19 virus	High	 We will ensure that all visitors and key contractors are aware of the school's control measures and ways of working. As was the case pre-pandemic, access to contractors/external maintenance personnel should be by appointment only and wherever possible, arranged after school, holidays or weekends. We will: continue to ask every visitor (over the age of 16) to 'check using the School "Passtab" register on entering the School. keep a record of all staff working in school, their shift times and dates, and their contact details; keep these records of visitors and staff for 21 days and provide this information to NHS Test and Trace, if requested. Ask every visitor to confirm they have completed a LFD test with a negative result in the previous 72 hours. 	Refer to Maintaining records to support NHS Test & Trace	Medium



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
Lack of wellbeing management for pupils and families	High	 Some pupils may be experiencing a variety of emotions in response to the coronavirus (Covid-19) outbreak, such as anxiety, stress or low mood. This may particularly be the case for vulnerable children, including those with a social worker and young carers. It is important to contextualise these feelings as normal responses to an abnormal situation. We will offer pastoral support to pupils who are self-isolating, shielding or who are vulnerable. We will also provide more focused pastoral support for pupils' individual issues, drawing on external support where necessary and possible. Where there is a concern a child is in need or suffering or likely to suffer from harm, we (generally led by the DSL or deputy) will follow our Child Protection Policy and Part 1 of Keeping children safe in education and consider any referral to statutory services (and the police) as appropriate. 	Refer to Promoting and supporting mental health and wellbeing in schools and colleges and Mental Health and Wellbeing Resources for Teachers & Teaching Staff	Medium
Lack of wellbeing management for staff	High	 We will be conscious of the wellbeing of all staff, including senior leaders themselves, and the need to implement flexible working practices in a way that promotes good work-life balance and supports teachers and leaders. We will monitor the wellbeing of people who are working from home or self-isolating and help them stay connected to the rest of the workforce, especially if the majority of their colleagues are on-site. We will keep in touch with off-site workers on their working arrangements including their welfare, mental and physical health and personal security. Where work-related issues present themselves, the HSE's published Stress Management Standards will be followed. We also offer a free phone and App self help and counselling support via Peninsula 0800 047 4097, Username Peninsula, Password EAP. 	Refer to extra mental health support for pupils and teachers, NHS Every Mind Matters and DfE School workload reduction toolkit	Medium
Inadequate communicatio ns with and training of staff	High	 We will provide clear, consistent and regular communication to improve understanding and consistency of ways of working amongst staff and explain and agree any changes in working arrangements, including those working from home. We will ensure all staff are kept up to date with how safety measures are being implemented or updated via the expectiations letter and regular staff briefings. 		



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 We will ensure ongoing engagement with staff, to monitor and understand any unforeseen impacts of changes to working environments. We will promote awareness and focus on the importance of mental health at times of uncertainty (see above). 		
Fire emergencies	High	 We will regularly review and where necessary, update the existing school Fire Risk Assessment and Fire Safety Management Policy/Evacuation Plan. We will ensure there are sufficient trained staff on duty e.g. sufficient fire wardens to cover the site to enable sweeps of all areas to be carried out and to ensure full evacuation of the building – particularly important if staff are required to self-isolate. We will assess the suitability of Personal Emergency Evacuation Plans (PEEPs) – especially if previous role holders are no longer available to continue e.g. they may be required to self-isolate. The use of portable heaters will be avoided where possible. However, where it is necessary to use these, we will ensure suitable controls are implemented and include within the existing Fire Risk Assessment. Propping open doors by any other means other than proprietary hold open devices triggered by the fire alarm is not permitted. We will consider the closing of windows should the fire alarm activate. Because of the need for increased ventilation in the school during the Covid-19 pandemic, there may not be time to close all windows prior to evacuation. This situation is only permissible where to close all the windows would result in increased risk to staff and pupils. 	Refer to advice on Fire safety in new and existing school buildings	Medium
Lack of building/ property maintenance	High	 All routine external and in-house monitoring, testing and inspection will continue as normal including: Routine in-house health & safety inspections; External and in-house maintenance of fire safety equipment and systems; Ongoing external and in-house hot and cold water safety (legionella) monitoring, maintenance and testing; In-house monitoring of asbestos containing materials; 	Refer to CIBSE: emerging from lockdown, HSE: Legionella Risks during the Coronavirus Outbreak	Low



Hazards & Associated Risks	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to explain/do?	Residual Risk
		 External and in-house monitoring, testing and maintenance of all other systems and equipment in line with statutory requirements and manufacturer's instructions. 		