COVID Risk assessment (COVID-19 response to government guidance, updated 14/4/22)



Main DfE guidance: https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak and https://www.gov.uk/government/publications/health-and-safety-advice-for-schools/responsibilities-and-duties-for-schools



Additional risks following the publication and update of the 'Living with COVID-19 have been assessed below. Government guidance will change regularly and it is important that the table below is updated accordingly. Please note the date of the review above.

School name: The Raleigh School

Government control measures

The school should:

- 1. Ensure good hygiene for everyone
- 2. Maintain appropriate cleaning regimes
- 3. Keep occupied spaces well ventilated
- 4. Follow public health advice

| What are the hazards? | Who may be harmed and how? | Actions to control this risk | Action by who? | Additional comment | | |
|--|--|--|----------------|--------------------|--|--|
| Response to infection | | | | | | |
| High risk of infection | Close contact with a confirmed case will increase the risk of infection | From 1st April, staff, visitors and pupils with symptoms of a respiratory infection, such as COVID-19, and a high temperature should try to stay at home and avoid contact with other people, until they feel well enough to resume normal activities and no longer have a high temperature. From 1st April, adults with a positive COVID-19 test result will be advised to try to stay at home and avoid contact with other people for five days. They can resume normal activities if they are well enough to do so and do not have a high temperature. Children with a positive COVID-19 test result should try to stay at home and avoid contact with other people for 3 days after the day they took the test. They can resume normal activities if they are well enough to do so and do not have a high temperature. Public health advice for People with COVID-19 and their contacts changed on 24th February 2022. Contacts are no longer required to self-isolate or advised to take daily tests, and contact tracing has ended. Face coverings are no longer advised for pupils, staff and visitors in classrooms or communal areas. Vaccines are recommended for all school staff Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higher-risk are not being advised to shield again. Children and young people who were previously identified as being in one of these groups are advised to continue to follow 'Guidance for people previously considered clinically extremely vulnerable from COVID-19'. Children and young people over the age of 12 with a weakened immune system should follow 'Guidance for people whose immune system means they are at higher risk from COVID-19'. | | | | |
| Staffing | | | 1 | T | | |
| Staff capacity / shortage will compromise the ability to run educational provision | Insufficient staff / shortage Staff to child ratio – adherence to current national guidelines for class size and safeguarding requirements | Headteacher to make all staff aware that should they be traveling to countries that require testing or quarantine upon return, they should allow sufficient time for this guidance to be implemented | | | | |

| Hygiene and cleaning | | | | | | | |
|---|--|---|--|--|--|--|--|
| Direct and indirect transmission combined with poor hygiene (not washing hands adequately or adhering to respiratory hygiene guidance) will result in a higher infection rate | Children and staff to adhere to increased hygiene (handwashing, sanitiser, tissues) and ventilation of spaces to reduce the risk of transmission | Ensure sufficient tissues, handwashing supplies and facilities are available with hand sanitiser available across the school, including all school entrances Frequent and thorough handwashing by children encouraged and made a regular practice Encourage children and staff not to touch their faces Use a tissue or elbow to cough/sneeze and use bins for waste (emptied regularly) Engage children in resources such as the DfE recommended e-Bug COVID-19 website Display posters in all rooms and entrances to reinforce expectations for good hygiene and hand-washing Natural ventilation encouraged. Advice is to balance ventilation while maintaining a comfortable temperature. Poorly ventilated spaces identified and CO2 monitors in use within these areas (to indicate when additional ventilation is required) Mechanical ventilation should be adjusted to increase the ventilation rate where possible and checked to ensure that normal operation meets current guidance and that only fresh air is circulated | | | | | |
| The virus can be transmitted by touching contaminated surfaces | Children and staff at school – touching contaminated surfaces | School cleaned at end of each school day Caretaker to ensure door handles, banisters, light switches and public areas are disinfected regularly Frequent cleaning of shared areas (including frequently touched surfaces, kettles, fridge doors) Ensure adequate stock of cleaning materials Handwashing facilities and supplies available and use encouraged | | | | | |
| | First aid | | | | | | |
| Medical and intimate care requires close proximity to a child, increasing the risk of transmission | Staff treating children for first aid or dealing with intimate care needs | Staff must wear appropriate level of PPE when dealing with first aid or intimate care of a child as appropriate Minimum of one first aid trained member of staff and DSL on site | | | | | |