		Corona	virus	COVII	D-19 I	Risk Asse	ssment – Thor	pe Church of	England Prin	nary School			
Assessmen	t Date:	Jul-20	Assess Carrie	sment d Out I	Зу:	Helen Sou	thgate	Assessment Red Approved by:	viewed &	Coordination com	mitte	e Aug	ust 20
This risk as	sessment is produ	ced in accordance w	ith gui	dance	from D	fE, Public H	ealth England						
The risk ass	sessment control n	neasures must be ir	npleme	ented to	o ensui	re the safet	y of our school com	munity					
The control	l measures put in ب	olace for this risk as	sessme	nt mus	t be co	mmunicate	ed to our school com	nmunity					
People inve	olved				All sta	keholder o	f Thorpe Church of E	England Primary	School				
Severity or (where 5 is severe):	n a scale of 1 to 5 the most	How severe the co hazard results in th	-			vity /	Likelihood on a sca most likely):	ale of 1 to 5 (who	ere 5 is the	How likely are the chance injury after the controls h			
Risk Reference	Activity that could lead to risk	Adverse effects (what could happen)	Likelihood	Consequence	Risk Rating	Initial Risk (H/M/L)		Mitigating c	ontrols and action	ons	Likelihood	Consequence	Risk Rating
1	Staff being	Procedures not	2	4	12	и	Health and Safety I	Policy has been ι	ipdated in light o	of the COVID-19 advice	,	2	4

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1	procedures	infection	n	4	12	п	All staff, pupils and volunteers are aware of all relevant policies and procedures including, but not limited to, the following: Infection Control Policy	Z		4
							All staff, pupils and volunteers are aware of all relevant policies and procedures including, but not limited to, the following: Health and Safety Policy, Infection Control Policy, First Aid Policy All staff have regard to all relevant guidance and legilsation including, but not			
							limited to, the following; The Reporting of Injuries, diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, The Health Protection (Notification) regulations 2010, Public Health England (PHE) (2017) 'Health protection in schools and other childcare facilities', DfE and PHE (2020) 'COVID-19; guidance for educational settings'			
							The relevant staff receive any necessary training that helps minimise the spread of infection eg infection control training.			
							The school keeps up-to-date with advice issued by, but not limited to, the following: DfE, NHS, Department of Health and Social Care; PHE			
2	Infection control policies not being followed	School could be lockdown due to infection	4	4	16	Н	Staff are made aware of the schools' infection control procedures in relation to coronavirus	2	3	6

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							Parents are made aware of the school's infection control procedures in relation to coronavirus via letter and school website - they are informed that they must not send their child to school if they have coronavirus (COVID-19) symptoms, or have tested positive in the last 14 days, or if another household member develops coronavirus symptoms. In both these circumstances the parents/carers should email the head@thorpe.surrey.sch.uk or call the school and follow the stay at home guidance.			
							Children are made aware of the school's infection control procedures in relation to coronavirus and are informed that they must tell a member of staff if they begin to feel unwell. Staff and volunteer's confidentiality is respected at all times, this includes withholding the names of staff, volunteers and pupils with either confirmed or suspected cases of coronavirus.			
							Staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, or have tested positive in the last 14 days, and anyone developing those symptoms during the school day are sent home.			
							If anyone in the school becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they are sent home and advised to follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection', which sets out that they must self-isolate for at least 14 days and should arrange to have a test to see if they have coronavirus (COVID-19). Other members of their household (including any siblings) should self-isolate for 14 days from when the symptomatic person first had symptoms.			

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							If a child is awaiting collection, they are moved, where possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. A window should be opened for ventilation. If it is not possible to isolate them, they are moved in an area which is at least 2 metres away from other people.			
3	Prevention ***** Infections could spread between individuals who are unwell	Prevention ***** fections could read between dividuals who are unwell School Closure 4 4 4 16 H running water or use hand sanitiser after any or unwell. The area around the person with sympton normal household disinfectant after they have passing the infection on to other people. See to healthcare setting guidance; https://www.gov.uk/government/publications non-healthcare-settings PPE will be worn by staff caring for the child widistance of 2 metres cannot be maintained (such a child with complex needs). More information the https://www.gov.uk/government/publication education-childcare-and-childrens-social-care/settings	https://www.gov.uk/government/publications/covid-19-decontamination-in-	2	3	6				
7				PPE will be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe	2	,	0			
							In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital.			

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							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. The Infection control policy and cleaning in non-healthcare settings guidance to be followed to clean the area.			
							Any medication given to ease the unwell individual's symptoms - paracetamol is administered in accordance with the Administering Medication Policy. Spillages of bodily fluids, eg respiratory and nasal discharges are cleaned up immediately in line with the Infection Control Policy and Cleaning in non-			
							healthcare settings guidance. The School will ensure that pupils clean their hands regularly, including when they arrive at school, when they return from breaks they will sanitise, when they change rooms and before and after eating.			
							Supervision of hand sanitiser use will take place due to risk around ingestion. Younger pupils and pupils with complex needs will continue to be helped to clean their hands properly. The School will build hand washing routines into school culture, supported by behaviour expectations set out in the school Behaviour Policy.			

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4	Prevention ***** Infections could spread because people haven't practiced good	Procedures not followed leading to infection	3	4	12	н	Pupils arriving at school wearing a face covering are instructed not to touch the front of their face covering during use or when removing them. They immediately wash their hands on arrival, dispose of temporary face covering in the class lidded bins or place reusable face coverings in a plastic bag they take home with them, and then wash their hands again before going to their classroom. Guidance on Safe working in education childcare and children's social care provides more advice.	2	3	6
	hygiene						Sufficient handwashing facilities are available. Where a sink is not nearby, we will provide hand sanitisers in classrooms and other learning environments or provide alternative hand washing solutions.			
							Catch it, bin it, kill it' approach continues to be very important, suitable number of tissues and pedal bins are available throughout the school.			
							Younger children and those with complex needs are helped to follow this. Risk assessments to identify children with complex needs who struggle to			
							maintain good respiratory hygiene, for example those who spit uncontrollably or use saliva as a sensory stimulant.			
							Surfaces that children touch: toys, books, desks, chairs, doors, sinks, toilets, light switches are cleaned more regularly than normal			
							Soft furnishings, soft toys and toys that are hard to clean (such as those with intricate parts) are removed.			
	Prevention ****						Different groups ('bubbles') have allocated toilet blocks, and toilets are cleaned regularly, and pupils encouraged to clean their hands thoroughly after using the toilet and sanitise before use.			

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	5	Infections could spread because cleaning of premises hasn't been rigorous enough	Procedures not followed leading to infection	3	4	12	Н	The COVID-19 cleaning of non-healthcare settings guidance is followed. Outdoor playground equipment should be cleaned more frequently. This includes resources used inside and outside by Owl Club and Earlybirds and other school lettings. Spillages of bodily fluids, eg respiratory and nasal discharges are cleaned up immediately in line with the Infection Control Policy and Cleaning in non-healthcare settings guidance. Cleaners are employed by the school to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and Health and Safety Policy	2	n	6
-								Mrs Neathey arranges enhanced cleaning to be undertaken where required - advice about enhanced cleaning protocols is sought from the local health team.			
								The number of contacts between pupils and staff is reduced. This is achieved through keeping groups separate (in Bubbles or Key Stage) and through maintaining distance between individuals. The balance between the Bubbles and social distancing is based on; Pupil's ability to distance, the layout of the school site, feasibility of keeping distinct groups separate while offering a broad curriculum. More information can be found in COVID-19 https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools			
								If staff or pupils cannot maintain distancing then visors are worn by adults, particularly with younger pupils, the risk is reduced by keeping children in class groups			

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								Staff should only move between bubbles when absolutely necessary and wear face masks (and visors when possible). Where staff need to move between classes and year groups, they must keep a distance from pupils and other staff of 2 m.			
ŀ								Adults to avoid close face to face contact and minimise time spent within 2m of anyone. Masks should be worn when not in bubble			
								Pupils old enough should be supported to maintain distance and not touch staff or their peers.			
								Classrooms and other learning environments are organised to maintain space between seats and desks where possible.			
								Pupils are seated side-by-side and facing forwards, rather than face to face or side from Y2 onwards.			
								Large gatherings such as assemblies, staff meetings and governor meeting will only take place via Zoom or Teams so that groups are kept apart.			
								The timetable is revised to implement where possible: Plan for lessons or activities which keep groups apart and movement around the school site to a minimum; Maximise the number of lessons or classroom activities which could take place outdoors; Staggered - break, lunch, drop off and pick up to minimise adult to adult contact.			
ľ		Prevention						Pupils use the same classroom or defined area of a setting throughout the day, with a thorough cleaning of the rooms at the end of the day.			
	6	***** Infections could spread because the contact	Procedures not followed leading	2	5	10	Н	Mixing within school is minimised by: accessing rooms directly from outside where possible; we will be using a one-way circulation for drop off and pick up; staggered lunch breaks and pupils clean their hands beforehand and	2	3	6
		between the school	to infection					enter in groups they are already in.			

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	community isn't minimised						Use of shared space such as halls is limited and there is cleaning between use by different groups;			
							Use of staffrooms and offices is staggered to limit occupancy so staff can stay 2m away from each other.			
							Visitors to the site, such as contractors, local authority employees and health employees to be fully briefed on the school's arrangements and follow site guidance on physical distancing and hygiene on or before arrival. Where visits can happen outside of school hours or virtually, they should. A record will be kept of all visitors.			
							Classroom based resources, such as books and games, are used and shared within the Bubble; these are cleaned regularly, along with all frequently touched surfaces. Resources that are shared between classes or Bubbles, such as sports, art and science equipment are cleaned frequently and meticulously and always between Bubbles, or rotated to allow them to be left unused and our of reach for a period of 48 hours (72 hours for plastic) between use by different Bubbles;			
							Children limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books and bags. Children and teachers can take books and other shared resources home, although unnecessary sharing is avoided. Rules on hand cleaning, cleaning of the resources and rotation apply to these resources.			
							Staff and pupils have their own individual, frequently used equipment such as pencils and pens. These are not shared.			

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							PE lessons should be kept in consistent groups and sports equipment thoroughly cleaned between use by different groups. Contact sports to be avoided. Outdoor sports to be priorities and if the hall needs to be used there must be a minimum distance between children of 2m or 1m+ if 2m is not possible.			
							Lessons which include singing, chanting, playing wind or brass instruments or shouting may cause an additional risk of infection. Control measures of physical distancing, being outside and limited group size to 15 positioning pupils back to back or side to side, avoiding sharing of instruments and ensuring good ventilation is in place.			
7	Prevention ***** Infections could	Procedures not followed leading	3	4	12	Н	The majority of staff are not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including; where an individual child becomes ill with coronavirus (COVID-19) symptoms while at school or where a child needs intimate care or undertaking health checks All staff will wear face covering when travelling around the school outside	2	3	6
	spread because PPE was not worn correctly.	to infection					their bubble. Staff undertaking health checks will wear a visor, face covering, gloves, apron and when teaching in close contact with a child they will wear a visor and may wear a mask			
			3	3	9	М	NHS Test and Trace process to be followed and understand how to contact their local team: https://www.gov.uk/guidance/contacts-phe-health-protection-teams	2	2	4

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	Response to	Procedures not	2	5	10	Н	If anyone displays symptoms they should book a test through the following link: https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested - it is important to provide details of anyone they have been in close contact with if they had tested positive for coronavirus (COVID-19) or if asked by NHS Test and Trace they will need to self-isolate if they have been in close contact with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19) follow; https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested -	2	2	4
8	infection	infection ***** followed leading	2	4	8	M	A small number of home testing kits will be available to give directly to parents and carers collecting a child who has developed symptoms at school or staff who have developed symptoms at school,	2	2	4
			2	4	8		The school will ask parents and staff to inform them immediately of results of the test; if someone tests negative, if they feel well and no longer have symptoms similar to COVID-19 they can stop self-isolating. If someone tests positive they should follow the stay at home guidance and must continue to self-isolate for at least 14 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. Other members of their household should continue to self-isolate for the full 14 days.	2	2	4
			2	4	8	IVI	The flowchart must be followed for suspected or confirmed cases of COVID-19 https://www.surreycc.gov.uk/data/assets/pdf_file/0004/228136/Flowchar t-School-response-to-suspected-or-confirmed-cases-of-Covid-19-coronavirus-v1-10-June-2020.pdf	2	2	4
			2	4	8	M	If someone has attended the site tests positive for COVID-19, the local health protection team will be contacted by the school.			

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			2	4	8	М	The health protection team will provide guidance to support a rapid risk assessment to confirm who has been in close contact with the person during the period they were infectious and ensure they are asked to self-isolate.			
9	Response to infection ****** managing confirmed COVID-19	Procedures not followed leading to infection	2	4	8	M	Based on the advice from the health protection team, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 14 days since they were last in close contact with that person when they were infectious. Close contact means; Direct close contacts - face-to-face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin). Proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual. Travelling in a small vehicle, like a car, with an infected person. Records of pupils and staff in each group and any close contact that takes place between pupils and staff in different groups to be kept. This does not need to include every interaction a member of staff or pupil has. Remote education plan in place by the end of September 2020 for individual pupils or groups of pupils self-isolating.	2	2	4
			2	4	8	М	If two or more cases are confirmed within 14 days or an overall rise in sickness absence where COVID-19 is suspected, there may be an outbreak and the local health protection will advise on any additional action required.	2	2	4

20 ausing lace Residual Risk (H/M/L)



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