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Welbourn CE Primary School

Risk Assessment School Opening January 2022

Hazard: Something with the potential to cause harm.

To Assess Risk: Consider Severity (S) and Likelihood (L) without Control Measures. Multiply (S x L)= risk

Describe Control Measures: Control measure(s) reduce the likelihood, and/or severity of harm, reducing risk.

Re-assess Risk, considering Severity (S) and Likelihood (L) with Control Measures in place.

Multiply $(S \times L)$ = Risk Rating (with controls).

Severity (S)	х	Likelihood (L)	=	Risk Ratings (R)		
Fatality = 5		Likely = 5		20 +	Very High Risk	
Injury (Specified injury / RIDDOR reportable) = 4		Probable = 4		15 - 19	High Risk	
Injury (requiring treatment and/or 3 to 7 day absence) = 3		Possible = 3		9 – 14	Medium Risk	
Injury (requiring treatment and/ or absence less than 3 days) = 2		Unlikely = 2		4 – 8	Low Risk	
Minor Injury = 1		Very Unlikely = 1		1 - 3	Very Low risk	

Prepared: Presented to Staff: Presented to Governors:

Presented to Parents: 4.1.22 Reviewed: 03.1.22

Hazard The Government Level Key action list School Level Control Measures - Mitigation, responses and confirmation that actions have been completed.	Severity	Risk	
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People		When an	Pupils, staff and other adults should follow public health advice on when to self-isolate and what	
with the		individual	to do. They should not come into school if they have symptoms, have had a positive test result or	
virus		develops	other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for	
infecting		COVID-19	example, they are required to quarantine).	
others		symptoms or	If anyone in your school develops COVID-19 symptoms, however mild, they will be sent home	
		has a positive	and they should follow public health advice.	
Risk to		test	For everyone with symptoms, they should avoid using public transport and, wherever possible,	
health			be collected by a member of their family or household.	
due to				
COVID-19			If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to	
COVID 17			do so. A window should be opened for fresh air ventilation if possible. Appropriate PPE should	
			also be used if close contact is necessary. If needed, a separate toilet should be used and	
			cleaned afterwards. (Blue mobile)	
			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)	
		E 0	□ disposable gloves	
		Ě	□ disposable plastic aprons	
		Prevention	 eye protection (for example, a face visor or goggles) 	
		Pre	How much PPE you need to wear when caring for someone with symptoms of COVID-19	
			depends on how much contact you have.	
			1. A face mask should be worn if you are in face-to-face contact.	
			2. If physical contact is necessary, then gloves, an apron and a face mask should be worn.	
			3. Wear eye protection if a risk assessment determines that there is a risk of fluids entering the	
			eye, for example, from coughing, spitting or vomiting.	
			eye, for example, from coogning, spining or vortilling.	
			When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and	
			following guidance on how to put PPE on and take it off safely in order to reduce self-	
			contamination.	
			Face masks should: cover both the nose and mouth; not be allowed to dangle around the	
			neck; not be touched once put on, except when carefully removed before disposal; be	
			changed when they become moist or damaged; be worn once and then discarded - hands	
			should be cleaned after disposal.	
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			All surfaces that the symptomatic person has come into contact with will be cleaned and	
			disinfected. Cleaning cloths should be disposed of and any waste should be double bagged	
			and retained for 72 hours.	

When memb adult come school guidar	
lion	Prevention
People with the virus nfecting others Risk to nealth due to COVID-19	

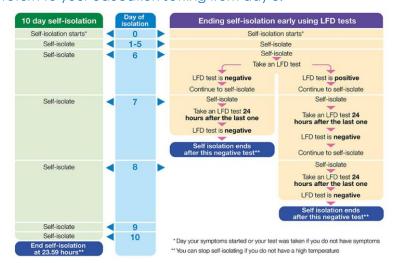
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Office staff to complete tracking sheet alongside the Headteacher.

The household (including any siblings) should follow the PHE stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection. Siblings under 18 can still attend school.

If a parent or carer insists on a pupil with symptoms attending school, the Headteacher can take the decision to refuse the pupil if, in their reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Decisions would need to be carefully considered in light of all the circumstances and current public health advice.

10 day self-isolation period for people who record a positive PCR test result for COVID-19 has been reduced to 7 days in most circumstances, unless you cannot test for any reason. Individuals may now take LFD tests on day 6 and day 7 of their self-isolation period. Those who receive two negative test results are no longer required to complete 10 full days of self-isolation. The first test must be taken no earlier than day 6 of the self-isolation period and tests must be taken 24 hours apart. This also applies to children under 5, with LFD testing at parental or quardian discretion. If both these test results are negative, and you do not have a high temperature, you may end your self-isolation after the second negative test result and return to your education setting from day 8.



Health and social care workers, including those working in education settings, should follow guidance for their sector on taking LFD tests on day 8, 9 and 10 as below:

If a staff member receives a positive SARS-CoV-2 PCR test result, they must complete a period of self-isolation. The isolation period includes the day the symptoms started (or the day their PCR test was taken if they do not have symptoms), and the next 10 full days. Staff may be able to end their self-isolation period before the end of the 10 full days. They can take an LFD test from the sixth day of their isolation period, and another LFD test on the following day. The second LFD test should be taken at least 24 hours later. If both LFD tests

tests, and should not return to work until a single negative LFD test result is received.

	All pupils and staff will clean their hands regularly including: when they arrive at school, when they return from breaks, when they change rooms and before and after eating. Handwashing: soap and water or hand sanitiser are considered suitable (paper towels acceptable ways to dry hands). Handwashing must take place: upon arrival after break times before and after snack/lunch prior to home time When they change rooms after coughing or sneezing into hands after physical exercise After toilet use Before and after using extended provision Before and after using shared resources outside All visitors must be directed to wash their hands or to use hand sanitiser upon arrival	
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Risk to health due to COVID- 19	Prevention	Ensure good respiratory hygiene by promoting a 'catch it, bin it, kill it' approach (All times)	Staff to promote/ teach the 'catch it, bin it, kill it' approach Supplies of tissues in all spaces – administrators to ensure that stocks are replenished to ensure sufficient supplies Lidded bins available Signage to promote good respiratory hygiene Individual pupil risk assessments in place where necessary (those with an EHCP) School will be well ventilated whilst maintaining a comfortable teaching environment. Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). When holding events where visitors such as parents are on site, for example, school plays, increased ventilation should be in place. The DfE CO2 monitors are in place in school to ensure adequate ventilation is in place. These are located in each classroom. Understanding the readings: A consistent value under 800ppm does not require any action (well ventilated) A consistent value of 1500ppm - poor ventilation (a real light should also appear) - improve ventilation (you do not need to stop using the room). To ensure an accurate reading, it is recommended a 5-minute wait is taken before taking action.
Risk to health due to COVID- 19	Prevention	Maintain appropriate cleaning regimes.	The enhanced cleaning schedule ensures areas and frequently touched surfaces areas are cleaned twice a day. Staff continue to ensure equipment is regularly cleaned (including PE equipment). Appropriate cleaning materials, including wipes for classroom use, are in place. Cleaning detergents are to be stored away from children. High touch surfaces (door handles, toilet levers, taps, banisters, soap dispensers, telephone etc) and toilets should be disinfected frequently. • Additonal staffing in place to clean midday and after school. • Cleaning checklist to be completed. • School cleaning undertaken at 3.30. • Disinfection spray and antibacterial (incl virus) wipes available in each room. All areas thoroughly cleaned at the end of each day by cleaner. All staff to use disinfectant wipes on telephones and computers before use.

Risk to health due to COVID- 19	Prevention	Staff /visitors to undertake regular asymptomatic testing	Staff should undertake twice weekly home tests. Staff with a positive LFD test result should self-isolate in line with the stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection. They will also need to get a free PCR test to check if they have COVID-19. Whilst awaiting the PCR result, the individual should continue to self-isolate. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.
	Pre	Risk to staff / visitors catching Covid-19- face coverings	Staff to wear face coverings in communal areas unless they are exempt. These should be disposed of in lidded bins. Ensure these cover the mouth and nose. Visitors are to wear face coverings.
Risk to health due to COVID- 19	Response to infection	Engage with the NHS Test and Trace process (Must be followed in every case where they are relevant)	Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case and/or their parent specifically identifies the individual as being a close contact. Those identified as a contact of someone with COVID-19 are strongly advised to take a LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result. Daily testing of close contacts applies to all contacts who are: • fully vaccinated adults – people who have had 2 doses of an approved vaccine • all children and young people 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 COVID-19 vaccine Children under 5 years are exempt from self-isolation and do not need to take part in daily testing of close contacts. Those testing positive on a LFD should isolate and take a PCR test. Public health advice should be sought if a pupil or staff member is admitted to hospital with COVID-19.

Risk to health due to COVID- 19		Educational visits	Education visits to take place.	Given the likely gap in COVID-19 related cancellation insurance, staff considering booking a new visit are advised to ensure that any new bookings have adequate financial protection in place. They should speak to either the visit provider, commercial insurance company, or the risk protection arrangement (RPA) to assess the protection available. Staff should undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment. General guidance about educational visits is available and is supported by specialist advice from the Outdoor Education Advisory Panel (OEAP).	
Insufficient staff to operate the schools		Staffing	School leaders are best placed to determine the workforce required to meet the needs of their pupils. Staff wellbeing.	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. If staff were previously identified as being in one of these groups, they are advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread. In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Whilst individual risk assessments are not required, employers are expected to discuss any concerns that people previously considered CEV may have. From 13 December office workers who can work from home should do so. Anyone who cannot work from home, such as those involved in the face-to-face provision of education, should continue to go to their place of work. Staff are encouraged to take up vaccines and staff who are eligible for a vaccination can attend booked vaccine appointments where possible even during term time. Staff who are pregnant – Risk assessments are in place and we follow the guidance https://www.gov.uk/government/publications/coronavirus-covid-19-advice-for-pregnant-employees/coronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-pregnant-employees/scoronavirus-covid-19-advice-for-p	
Students		ITT trainees/ apprentices	The government strongly encourages schools to host ITT trainees	ITT trainees/apprentices will be allocated a mentor to support them at school. The mentor will ensure that the trainee is aware of all COVID operations and is provided with a copy of this risk assessment. All trainees to continue to do testing twice a week and report results.	

Pupils suffering with mental health issues as a result of the pandemic		Pupil Well-being	Some pupils may be experiencing a variety of emotions in response to Covid 19 such as anxiety, low mood or stress.	Trained staff to support the well-being of pupils. Interventions and support in place to work alongside parents. Referrals to be made if needed to seek external support.		
Pupils long term education lost.		Pupil attendance	School attendance is mandatory for all pupils of compulsory school age.	Registers - Online registers to be taken 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 should 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. All clinically extremely vulnerable (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 paediatric or other specialist care who have been advised by their clinician or other specialist not to attend. 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.		

Lost learning due to non attendanc e		Remote education	Schools subject to the remote education temporary continuity direction are required to provide remote education to pupils covered by the direction where their attendance would be contrary to government guidance or legislation around COVID-19.	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. Our Remote Education Policy is in place to ensure a high-quality remote education is in place, including for pupils who are abroad, and facing challenges to return due to COVID-19 travel restrictions, for the period they are abroad.		
Increased risks due to increased cases		Confingency	Additional measures.	Contingency plans are in place outlining what we would do if children or staff test positive for COVID-19, or how you would operate if you were advised to take extra measures to help break chains of transmission.		