HSF 19

Westfield Primary School Covid- Risk Assessment

1. Section/Service/Team Whole School 2. Assessor(s) SLT

3. Description of Task/Activity/Area/Premises etc. Schools full opening March 2020 - Minimising the risk of transmission of COVID-19

What are the hazards?	Who might be harmed and how?	What are you already doing? List the control measures already in place	What is the risk rating – H, M, L? See section 5	What further action, if any, is necessary, if so what action is to be taken by whom and by when?	Action Completed State the date completed and sign.	What is the risk rating now – H, M, L? See Section 5
Exposure to COVID-19 The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing. The virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).	Everyone on site. General transmission may occur: Through close contact between colleagues, pupils and visitors and touching contaminated surfaces.	 Anyone with COVID-19 symptoms or who have someone in their household who does is informed not to attend school. Anyone developing COVID-19 symptoms during the school day is sent home and procedures followed to manage transmission risks Control measures in place for clinically vulnerable staff and pupils. Active engagement with NHS Test and Trace service. Staff to engage in lateral flow testing. https://www.gov.uk/government/publications/coro navirus-covid-19-asymptomatic-testing-for-staff-in-primary-schools-and-nurseries/rapid-asymptomatic-coronavirus-covid-19-testing-for-staff-in-primary-schools-school-based-nurseries-and-maintained-nursery-schools Aware of LA Local Outbreak Control Plans. Minimise the number of contacts between staff and pupils. Remind parents of arrangements for drop off and collection procedures to reduce adult to adult contact. 	Μ	 Follow local health protection team advice. Provide home testing kits when there is a suspected case (Once kits arrive in school) Continue to review stocks of soap, hand sanitiser and number of hand sanitiser stations, tissues. Consider if skin friendly skin cleaning wipes are needed for younger children and pupils with complex needs. Ensure pupil groups and social distancing maintained during fire drills. NOTE: in an emergency social 		L

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		 handle. Cleaning materials provided in these areas for staff to use in between cleans. Storerooms and cupboards accessed by one person at a time. Children to use hand sanitiser provided before using outdoor equipment. Staff able to take in children's books to mark but regular handwashing is encouraged after handling. Children are able to take home reading books and share between children from their own bubble. If/when books need to shared across different groups then the books will be quarantined for a period of 48 hours. Contractors delivering services using school facilities, such as dance studio are asked to provide copies of their risk assessment for managing exposure to COVID-19. Singing, wind and brass playing not to take place in large groups. Older pupils encouraged to keep their distance within groups. Physical activity - Outdoor sports prioritised and contact sports avoided. Music lessons – group size limited to 15 and physical distancing in place. Educational visits (where no overnight stay is involved) will continue. A further risk assessment will be completed. 					

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		 Adults asked to wear masks when dropping off and collecting children on the playground (amended Oct 20) Staff asked to wear masks when in shared areas of school / corridors in response to staff concerns (amended Nov 20) 				

Exposure to COVID-19	Staff and pupils.	PPE provided (such as disposable gloves,
	Transmission may	disposable apron)
The virus is spread in minute	occur when	Hand washing after providing care.
water droplets that are	providing	Staff using PPE instructed on the safe "donning
expelled from the body	personal or	and doffing" of PPE.
through sneezing, coughing,	intimate care	Review personal care plans to assess PPE needs
talking and breathing.		based on individual circumstances.

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The virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).	Staff and casualty. Transmission may occur when providing First Aid	 Wash/sanitise hands before and after treating a casualty. Wear PPE provided (such as disposable gloves, disposable apron). When directly treating people with symptoms of COVID-19 a fluid repellent surgical mask should be worn and eye protection may be needed where there is a risk of fluids entering the eyes due to repeated coughing, spitting or vomiting. When performing CPR phone an ambulance and use compression only CPR until the ambulance arrives. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield where available. 	 Review Assessment of First Aid Needs. First aiders instructed on the safe "donning and doffing" of PPE. Maintain stocks of PPE. Where this is not available contact LA. List of LA PPE suppliers communicated to schools. PPE Exchange can be used to help with finding a supplier. <u>https://www.ppeexchange.c o.uk/</u>
	transmitting the CO	d having an out-of-hospital cardiac arrest will be known to	 o you. We accept that doing rescue breaths will increase the risk of this risk is small compared to the risk of taking no action as this will Maintain stocks of PPE. Where this is not available contact LA. Supervising adult instructed on the safe "donning and doffing" of PPE. TAs/First aiders to supervise to reduce numbers of staff who need access to PPE.

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Staff and pu Transmissic occur when administer medicines o supervise pi who self- administer.	n may risk assessments. staff	 Review medication plans to assess PPE requirements (if any) for staff administering medication. Liaise with external medical advisors e.g. diabetic nurse regarding requirements for PPE. 	

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Adverse effects on the mental health of pupils.	long gap in their education, settling in to new routines and changes to school life may be	 Staff to access The Department for Education free webinar for school and college staff on 9 July to set out how to support returning pupils and students. Access training from The Whole School SEND consortium. Staff to access DfE CPD on teaching mental health. Staff to access the free MindEd learning platform for professionals, which includes a coronavirus (COVID-19) staff resilience hub with materials on peer support, stress, fear and trauma and bereavement. Survey parents to determine immediate support needs for September. Class assemblies to be used to address worries/concerns. Each class to have a 'worry box' to share their feelings, worries with an adult. Maintain communication with families through class emails. Sally Boswell (learning/pastoral mentor) to support individuals 1:1 or in small groups. Focus on PSHE/circle time in September. Information re systems to be shared with families in July to encourage discussion/preparation at home. 	M	SLT	L

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Adverse effects on the mental health of staff. Working under stressful conditions may have a detrimental impact on mental health. COVID-19 related anxiety could also impact staff.	 Opportunities for staff to raise concerns with phase leaders and through whole school meetings. Open channels of communication – staff able to speak to any senior leader to raise their concerns or worries Governors made aware of the views of staff. Confidentiality maintained Staff given autonomy to manage their own health – if they feel more comfortable wearing PPE then this will be available. Contingency staffing plan in place should there be a need to bring someone out of their current role. Individual risk assessments completed. Senior leaders to distribute support/guidance documents to keep staff informed at all stages. Risk assessment and all safety measures clearly communicated with staff. 	L

4. Tick ($\sqrt{}$) if any of the identified hazards relate to any of the following specific themes:

Hazardous Substance	Manual Handling	Display Screen Equip	Fire	Work Equip / Machinery	Stress	Individual Person such as Young Person New/ Expectant Mother or Service User
					\checkmark	\checkmark

If any are ticked a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

5. Risk Rating

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

Risk Rating	Description	Action Priority
High	Where harm is certain or near certain to occur and/or major injury or ill-health could result	Urgent action
Medium	Where harm is possible to occur and/or serious injury could result e.g. off work for over 3 days	Medium priority
Low	Where harm is unlikely or seldom to occur and/or minor injury could result e.g. cuts, bruises, strain	No action or low priority action

6. Assessment

Signature of Assessor(s): Print Name: Signature of Line Manager: Print Name:

Date Assessed:

Review Date:

7. Communication and Review

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed annually or following a significant change, accident or violent incident.