

## Woodgrange Infant School Risk Assessment NOVEMBER 2021

This document has been revised in accordance with Dfe guidance received 24/8/2021. It will be monitored and reviewed regularly

Shared with:

SLT 17/11/21

Staff 17/11/21

| Issue/risk area   | Identified risks                                   | Overall assessment of risk BEFORE mitigation | Mitigating actions (Including who will be responsible)<br><b>Main protective measure:</b><br>Staff compliance-avoid crowding,staff monitor who we are in close contact with<br>ventilation and use of outdoors<br>twice weekly LFD tests to catch asymptomatic cases<br>minimise contact/ visitors<br>vaccination to minimise risk of serious implications  | Overall assessment of risk AFTER mitigation | Key changes<br><br>Bubbles not required<br>self isolation not required   |
|---|--|--|---|---|--|
| <b>Site issues (Cleaning, Catering, Equipment and suppliers, contractors in school)</b> | Staff awareness of risks and mitigating actions    |  | Updated guidelines for staff on procedures shared before start of term<br>Staff can email to raise questions/ issues/ concerns or leave note in HT's pigeonhole<br><b>A meeting took place on 19.11.21 to remind staff that numbers COVID numbers are increasing in the school and precautions that need to be taken.</b><br><b>Updated RA and Management Outbreak Plan to be shared with staff on 22.11.21</b>   |   |  |
|   | Deliveries<br>Contractors                          |  | Deliveries- minimal contact with delivery drivers- maintain social distance/ behind glass screen<br>Use of toilets only by permission with rules on handwashing made clear.   |   | masks not required but are welcomed-sign on door to say so   |
|   | Risk of infection from parents/ visitors to school |  | <b>No one with symptoms will be allowed in school- guidance issued to all parents</b><br>SLT on gates 8.55/ 3.30pm available for queries/ questions from parents<br>Gates closed promptly<br>Children received in playground - soft start from 8.55<br>If children are upset parents try to settle them outside<br>Minimal face to face visitors- parents asked to email or phone<br>If face to face contact required it takes place out of doors at an appropriate distance- masks can be worn by staff<br>Late arrivals signed in by staff not parents, youngest children escorted if necessary<br>"Forgotten items" stay at home- UNLESS essential for learning/ health<br>Remote- paperless- systems for admissions & medical forms<br>Late collections stay in class until the parent arrives- office notified by phonecall// email at 3.45. |   | Guidance for parents via newsletter- paper copy for all at start of term<br><br>children can be collected/ return for appointments to maintain good attendance<br><br>school day returns to 8.55/ 3.30 finish<br>doors close 9.10<br><br>no change to remote admin systems |
|   | Lunchtimes   |  | Lunchtimes to be staggered into 30 minute windows for each year group.<br>Midday assistant assigned to all classes<br>Children wash hands before/ after eating  |   | No change to lunchtime arrangements  |

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|          |  |  | Shortage of lunchtime is being reviewed daily and cover is being arranged.   |  |
| Staffing | High infection risk due to staff contact |  | <p>Staff with symptoms do not attend work- they should speak to HT or DHT in the morning to confirm symptoms/ arrangements</p> <p>LFDs twice weekly to identify symptomless cases</p> <p>If the threshold is met for an outbreak in a classroom all staff are asked to take a PCR test. See Outbreak Plan for further details.</p> <p>Rigorous and transparent contact tracing if case occurs- staff to keep a note of close contacts and disclose them</p> <p>Identified close contacts by NHS Test and Trace. Close contacts are not required to self isolate but should take a PCR test, isolating if positive- continue to attend school whilst waiting for results</p> <p>Review staff working in the affected classroom, e.g. pregnant and unvaccinated staff. Ensure all those that have been in close contact that may not have been contacted via NHS Test and TRace are contacted.</p> <p>All staff spaces are well ventilated- all windows open a bit is better than 1 open fully. Stress the importance of this current variant being more airborne and more transmissible via children.</p> <p>Staff space themselves at lunchtime and for meetings- 2 metres where possible. Ensure there is ventilation.</p> <p>Staff meetings in year groups with adequate social distancing - delivered by zoom where appropriate - no more whole staff meetings</p> <p>Recommendation that staff wear a face covering where threshold outbreak is; this may increase to communal areas and corridors..</p> <p>Supply staff, additional staff e.g. PE/Music teacher and visitors follow the same recommendations.</p> <p>Staff always choose the best ventilated room for meetings</p> <p>Staff always use dishwasher</p> <p>Break out spaces available across school - library/PPA room etc</p> <p>Staff clean as they go eg wipe surfaces using detergent and cloths etc</p> <p>Office contact- phone/ email or lobby/ doorway until invited to enter- includes all offices/ small rooms</p> <p>Staff use fobs to sign in/ out and hand sanitise on entry</p> <p>Where staff work in different classrooms they should keep a record of their movements to help contact identification if needed</p> <p>Review class bubbles / groups / staff mixing bubbles if necessary, according to Public Health advice for a temporary period to reduce mixing.</p> <p>SEND support organised within year groups</p> <p>Staff within year groups cover each other's breaks</p> <p>PPA room should not have full capacity even with ventilation- PPA timetable planned to avoid the need for this</p> | <p>emphasised need for ventilation for all rooms and for social distancing</p> <p>all meetings will be small and socially distanced- delivered on zoom/ teams where workable</p> |

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|--|---|--|--|--|--|
|  | Risk of infection to staff related to young children's ability to follow social distancing rules and in meeting intimate care needs |  | Hand washing and hygiene- expectations clear, consistent and regularly revisited- before/ after eating, sneezing, after toilet use not required before/ after carpet sessions etc<br><b>Implement enhanced cleaning, focusing on touch points. We currently have a cleaner midday to clean toilets and s/he will also be directed by SLT to clean areas where there is an outbreak.</b><br>PPE available - masks recommended for close contact/ first aid and intimate care<br>Children trained in catch it, bin it, kill it" for tissues using lidded bins and washing hands for 20 seconds |  | regularity of hand washing reduced- limited evidence of transmission via contact but as good hygiene habits reduce wide range of infections so need to maintain this |
| <b>Pupils attending school</b>                               | High infection risk due to pupils and staff unable to maintain social distancing -  |  | ALL rooms well ventilated<br>If a case is identified close contacts will be identified<br><b>Where there is an increase in cases is mainly in one class, we will recommend that children and staff all have a PCR test but still attend school until results are returned (Management outbreak plan).</b>  |  | can mix but will avoid indoors   |
|  | Risk of transmission during the conduct of practical activities in school   |  | <b>Rooms ventilated</b><br><b>Computers-</b> allocated to a class<br><b>Toilets</b> cleaned midday<br>Holly use main toilets<br>Y2 use class toilets when outside  |  | singing and recorders permitted<br>PE equipment only required cleaning in case of "accident"   |
| <b>First Aid and Pupils with Medical Conditions</b>          | Risk that first aid arrangements and equipment do not provide adequate protection for staff against infection                       |  | First aid will be administered in class to avoid unventilated first aid room   |  | any child needing to go home due to any illness can wait in class (unless before school starts)  |
| <b>Pupils with Special Needs</b>                             | Risk the needs of pupils with complex SEND may not be safely met in school  |  | Individual RAs updated as required by Inclusion lead and team with some support from services if required<br>Windows open in smaller spaces- sensory room/ Juniper Rocking & rolling only in year groups.<br>children supported to understand rules and to wash hands<br>PPE for intimate care   |  |  |
| <b>Communication</b>   | Risk that pupils and parents do not understand the risks  |  | Clear guidance and regular reminders to all parents via Newsletters<br>SLT at gates to advise and support parents<br>Ongoing daily/ weekly reviews and RAs of situation  |  | simpler rules  |
| <b>Staff wellbeing</b>                                       | Risk of mental health impacts   |  | SAS counselling available<br>mental health first aid training for 2 staff being arranged<br>well-being team working on policies Autumn term<br>Mindfulness coach on staff<br>Regular breaks throughout the day<br>Team leader debriefs/ reviews daily/ weekly as required<br>Individual, confidential risk assessments if required   |  |  |
| <b>Passing case threshold where number of positive cases</b> | Risk of further spread within class and further in school   |  | Refer to Woodgrange Covid-19 Guidance on procedures - last updated November 2021. See: <b>Contingency Plan / Outbreak Management Plan</b>  |  |  |

substantially  
increases

## Annex – Guide to assessing risk

### Impact:

This is the potential impact of the risk on the organisation should it materialise. You can use a scale between 1 and 4 to rate the impact.

### Likelihood:

This is the probability of the risk occurring. You can rate the likelihood of the risk using a scale of between 1 and 4.

### Risk Rating:

The current risk rating is worked out by multiplying the impact and likelihood ratings of the risk. You should then use this rating to prioritise the risk.

A risk matrix with 'Impact' on the vertical axis and 'Likelihood' on the horizontal axis. The vertical axis has four levels: Major, Serious, Significant, and Minor. The horizontal axis has four levels: Remote, Unlikely, Likely, and Very Likely. The cells contain numerical ratings from 1 to 16, color-coded as follows: Green for ratings 1-4, Amber for ratings 6-8, and Red for ratings 9-16.

|             | Remote | Unlikely | Likely | Very Likely |
|-------------|--------|----------|--------|-------------|
| Major       | 4      | 8        | 12     | 16          |
| Serious     | 3      | 6        | 9      | 12          |
| Significant | 2      | 4        | 6      | 8           |
| Minor       | 1      | 2        | 3      | 4           |

**High Level Risks** are risks rated **9-16** are coded **RED**. You should prioritise and manage these risks first.

**Medium Level Risks** are risks rated **6 – 8** are coded **AMBER**. These risks need to be managed and continually reviewed to ensure they are not posing any significant threats. Close monitoring is essential to avoid them developing into red/ high risks where possible.

**Low Level Risks** are the risks with the risk rating of **1 – 4** are coded **GREEN**. These risks require limited action but they need to be reviewed regularly to ensure they are not posing any threats.