



Queen Mary's Grammar School

Coronavirus (COVID-19): Risk Assessment Action Plan, October 2021

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| Assessment conducted by: RJ Langton | Job title: Headmaster | Covered by this assessment: Queen Mary's Grammar School |
| Date of assessment: 6/1/22 | Date of next review: Feb 2022 | |

The sole purpose of this risk assessment is to support schools in preparing for full school opening in September 2021, **whilst reducing the risk of coronavirus transmission.**

- For the purpose of this risk assessment, the term ‘coronavirus’ to refer to coronavirus disease 2019 (COVID-19).
- Schools must ensure that this risk assessment reflects the local setting and context of the school. Staff must be consulted with regard to this risk assessment.
- This should be viewed alongside relevant advice and guidance from the Department of Education and reflect any additional subsequent guidance issued to schools.
- Additional information and considerations for leaders is given in the ‘Reopening of Schools (Final)’ discussion document.
- For further reference, <https://www.gov.uk/government/latest?departments%5B%5D=department-for-education>, including the documents below,
 - [What parents and carers need to know about schools and other education settings during the coronavirus outbreak](#)
 - [Guidance-for-full-opening-schools](#) September 2021
 - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1011704/20210817_Contingency_Framework_FINAL.pdf

The DfE’s [operational guidance](#) for schools states that:

The government continues to manage the risk of serious illness from the spread of the virus. Step 4 marked a new phase in the government’s response to the pandemic, moving away from stringent restrictions on everyone’s day-to-day lives, towards advising people on how to protect themselves and others, alongside targeted interventions to reduce risk. As COVID-19 becomes a virus that we learn to live with, there is now an imperative to reduce the disruption to children and young people’s education - particularly given that the direct clinical risks to children are extremely low, and every adult has been offered a first vaccine and the opportunity for 2 doses by mid-September. Our priority is for you to deliver face-to-face, high-quality education to all pupils. The evidence is clear that being out of education causes significant harm to educational attainment, life chances, mental and physical health.

INFECTIOUS DISEASES COVID-19 STEP 4 – AUTUMN TERM
PRIMARY AND SECONDARY

| Hazard/ Activity | Persons at Risk | Risk | Control measures in use | Residual risk rating H / M / L | Further Action Required | |
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| | | | | | YES | NO |
| Awareness of policies and procedures | Staff Pupils Others | Inadequate information | <ul style="list-style-type: none"> • All staff, parents, governors, visitors and volunteers are aware of all relevant policies and procedures. • All staff have access to all relevant guidance and legislation including, but not limited to, the following: <ul style="list-style-type: none"> • 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, e.g. infection control training. • The school keeps up-to-date with advice issued by, but not limited to, the following: <ol style="list-style-type: none"> 1. DfE 2. NHS 3. Department for Health and Social Care 4. United Kingdom Health Security Agency (UKHSA) 5. PHE • Staff are made aware of the school's infection control procedures in relation to coronavirus via email or staff meetings and contact the school as soon as possible if they believe they may have been exposed to coronavirus. • Parents are made aware of the school's infection control procedures in relation to coronavirus via letter and social media – they are informed that they must contact the school as soon as possible if they believe their child has been exposed to coronavirus. • Pupils are made aware of the need to tell a member of staff if they feel unwell. | MED | | ✓ |
| Disruption to the running | Staff Pupils | Infection control | <ul style="list-style-type: none"> • The school has an up-to-date Critical Incident and Business Continuity Plan in place – the plan is reviewed as necessary. | MED | | ✓ |

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| of the school in cases of local outbreak | Others | | <ul style="list-style-type: none"> The school adheres to and keeps up-to-date with the latest local and national advice about school closures – advice is sought from the local Health Protection Team (HPT) or DfE helpline where required. Follow Government advice and follow any instructions | | | |
| Use of Transport | Staff Pupils Others | Infection Control | <ul style="list-style-type: none"> We recommend that face coverings are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school " It is important to ensure vehicles are well ventilated when occupied, by opening windows and ceiling vents. The need for increased ventilation while maintaining a comfortable temperature should be balanced. On dedicated transport: It is recommended that children and young people aged 11 and over continue to wear a face covering when travelling to secondary school or college. It is no longer recommended maximising distance and minimising mixing, but unnecessary risks such as overcrowding should be minimised. Unnecessary risks such as mixing and overcrowding should be minimised. Children, young people and adults should follow UKHSA on when to self-isolate and what to do. They should not board dedicated transport or public transport if they have symptoms or other reasons requiring them to stay at home due to the risk of them passing on COVID-19. If a child or young person develops COVID-19 symptoms, however mild, while at school, they will be sent home. They should avoid using public transport and, wherever possible, be collected by a member of their family or household. In exceptional circumstances, if parents or carers cannot arrange to have their child collected, and it is age-appropriate and safe to do so, the child should walk, cycle or scoot home. If this is not possible, alternative arrangements may need to be organised by the school. More information on organising transport for children with symptoms is provided at guidance on the use of PPE in education, childcare and children's social care settings. Schools should have contingency plans outlining how they would operate if the number of positive cases substantially increases in the school or local area. Principles of managing local outbreaks of COVID-19 in education and childcare settings are described in the contingency framework. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> School will follow director of public health advice in cases of local outbreak. Schools put into place any actions or precautions advised by their local HPT. | | | |
| Beginning/ end of school day | Staff Pupils Others | Infection Control | <ul style="list-style-type: none"> The school shall move away from the staggered start and finish times, which were in operation during 2020-21 Issue information to parents about arrival and departure timings and procedures, including safe drop-off and pick-up. Advise parents to avoid congregating at the front of school at the beginning of the school day. Staff may come on to site from 7.30am and the site shall be open until 10pm Students may enter the site from 8am, but cannot move to form rooms until 8.30am Students may wait from 8-8.30am outside, in the canteen or in the Bateman Room (sixth form) All students shall be dismissed at 3.40pm (or at the end of their last lesson with sixth form) Students should leave site once dismissed, unless they are attending an after school activity Outbreak management plan includes a move back to staggered start/finish times | MED | | ✓ |
| Cleaning of school | Staff Pupils Others | Infection Control | <ul style="list-style-type: none"> All hard surfaces to be cleaned on a regular basis by the daytime cleaner; this will include <ul style="list-style-type: none"> All door handles All tables and chairs used by staff and pupils Toilet flushes and regular cleaning of toilets. <p>All classrooms to have spray disinfectant, alcohol-based hand sanitiser, tissues and where possible disposable cloths. If disposable cloths are not available, use once and then put in wash.</p> <ul style="list-style-type: none"> Regular cleaning of surfaces will reduce the risk of spreading the virus. All used cloths thrown away to be double bagged and then placed in a secure area i.e. lockable bin. | MED | | ✓ |
| Ventilation class/office | Pupils Staff | Infection control | <ul style="list-style-type: none"> Identify any poorly ventilated spaces and take steps to improve fresh air flow If mechanical ventilation systems are used to draw fresh air or extract air from a room these should be adjusted to increase the ventilation rate wherever possible Ensure that mechanical ventilation systems only circulate fresh outside air and where this is not possible, in a single room supplement with an outdoor air supply | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> • Where appropriate open external windows, internal doors and external doors to improve natural ventilation • If external doors are opened, ensure that they are not fire doors and are safe to do so | | | |
| Poor hygiene practice | Staff Pupils Others | Ill Health | <ul style="list-style-type: none"> • Continue to ensure that children clean their hands regularly, this can be done with soap and water or hand sanitiser • Staff and visitors are encouraged to wash their hands with soap or alcohol-based sanitiser (that contains no less than 60% alcohol) and follow infection control procedures in accordance with the DfE and PHE's guidance. • Posters are displayed around school reminding students of the required hygiene practices. • Sufficient amounts of soap (or hand sanitiser where applicable), clean water and paper towels are supplied in all toilets and kitchen areas. • Pupils are supervised by staff when washing their hands to ensure it is done correctly, where necessary. • All pupils will be expected to use hand sanitiser every time they enter a classroom. • Teachers to reiterate key messages in class-time (when directed) to pupils to: <ul style="list-style-type: none"> ○ Cover coughs and sneezes with a tissue, ○ To throw all tissues in a bin ○ To avoid touching eyes, nose and mouth with unwashed hands. • Pupils are instructed to wash hands after using the toilets and to use the sanitising gels when returning to the teaching area. • • Pupils are discouraged from sharing cutlery, cups or food. • All cutlery and cups are thoroughly cleaned before and after use. • Cleaners to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy. • The site manager arranges enhanced cleaning to be undertaken where required – advice about enhanced cleaning protocols is sought from the HPT/PHE | MED | | ✓ |
| Spread of infection | Staff Pupils Others | Lack of infection control | <ul style="list-style-type: none"> • Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with guidance, using PPE at all times. • Parents are informed not to bring their children to school or on the school premises if they show signs of being unwell and believe they have been exposed to coronavirus. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> • Staff and pupils do not return to school before the minimum recommended exclusion period (or the 'self-isolation' period) has passed, in line with national guidance. • Pupils who are unwell are not taken on school trips or permitted to enter public areas used for teaching, e.g. swimming pools. • Parents notify the school if their child has an impaired immune system or a medical condition that means they are vulnerable to infections. • The school in liaison with individuals' medical professionals where necessary, reviews the needs of pupils who are vulnerable to infections. • Any additional provisions for pupils who are vulnerable to infections are put in place by the headteacher, in liaison with the pupil's parents where necessary. • Shared teaching resources (such as science equipment) to be cleaned prior to and after use. The use of practical equipment in PE, Music, Science, DT, Food, etc. to be minimised and subject to a subject specific risk assessment. • Hand sanitiser/ anti-bacterial wipes to be in place at photocopiers/shared keyboards/telephones etc. | | | |
| Classroom management | Pupils Staff | Infection control | <ul style="list-style-type: none"> • It is no longer required for forward facing tables etc. however care should still be taken on table management in a classroom setting. • Seating plans should be produced and shared via MS Teams for use with any close contact identification • The teacher zones remain marked out in case of an outbreak, but staff can circulate the room in the absence of this • Where possible, windows to be opened to provide ventilation. • Inform students that they must bring the required equipment to school (stationery, calculators, etc.) to reduce the risk of infection. • Outbreak management plans should cover the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak. • It would be sensible to revert back to previous control measures in the event of a local outbreak. • Continue to use a cautious approach with arrangements. • At the discretion of staff, the teacher's desk must be kept 2 metres away from the children's tables/desks and a 2m distance should be maintained when teaching from the front of the classroom. • Tissues, disinfectant wipes and hand sanitiser to be located in each classroom/learning space. | MED | | ✓ |

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| <p>Students attending lessons at another MAT school (site) increases the risk of infection at both the host and home schools.</p> | <p>Pupils Staff</p> | <p>Infection control</p> | <ul style="list-style-type: none"> • Students may attend lessons or meetings at other MAT schools. • Staff and students should follow previously listed rules on transport and make themselves familiar with control measures on other sites. <p>Staff and students to make other schools aware if symptoms develop and should not attend if unwell.</p> <p>In classrooms teachers will:</p> <ul style="list-style-type: none"> • Group together pupils from the same school in their classrooms and keep these student groups apart. • Resources will not be shared between these groups during the lesson <p>Students will ensure they:</p> <ul style="list-style-type: none"> • Frequently wash/ sanitise their hands. • Wear face masks on transport and around the school site. • Arrive and depart the host school site within 5mins of their lessons. <ul style="list-style-type: none"> • As a result, the risk of infection is reduced as pupils and staff travel between sites. | <p>MED</p> | | |
| <p>Staff attendance at another MAT school (site) increases the risk of infection at both the host and home sites</p> | <p>Staff</p> | <p>Infection control</p> | <ul style="list-style-type: none"> • Visits between sites will be minimised, and only considered if no suitable alternative is feasible. • All visiting staff to sanitise hands using appropriate hand gel available upon arrival onsite. • Any visitor who feel unwell on site to report reception and leave the site immediately. Advice from PHE sought. • A face covering must be worn in corridors and communal areas. • All visiting staff should arrive and depart the host school site in a timely manner, where this is not possible they will ONLY use the facilities that have been designated for visitors. • Outbreak management plans should cover the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak. https://www.gov.uk/government/publications/coronavirus-covid-19-local-restrictions-in-education-and-childcare-settings/contingency-framework-education-and-childcare-settings • It would be sensible to revert back to previous control measures in the event of a local outbreak. • Continue to use a cautious approach with arrangements. | <p>MED</p> | | <p>✓</p> |

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| Assemblies/ Large indoor gathering | Pupils Staff | Infection Control | <ul style="list-style-type: none"> • There should be no whole school indoor gatherings of staff or pupils for assemblies or briefings. Consider virtual meetings where necessary. • Staff meetings should take place in rooms with good ventilation and with all attendees wearing masks at all times. Consider virtual meetings if possible. • All non-essential events where parents/ carers visit school should be moved to virtual events where possible. • Outbreak management plans should cover the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak | MED | | ✓ |
| Lunchtimes | Pupils Staff | Infection Control | <ul style="list-style-type: none"> • Lunchtime arrangements will revert back to previous arrangements (1-2pm), but there will be tighter control on numbers and designated entrances/service areas • Tables must still be cleaned on a regular basis throughout dinner time activities by the daytime cleaner • Enhanced cleaning should be considered during changeover periods. | MED | | ✓ |
| Break time and using equipment | Pupils Staff | Infection Control | <ul style="list-style-type: none"> • Previous groups can be reinstated and no restrictions in place regarding using and sharing equipment. • Outbreak management plans should cover the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak | MED | | ✓ |
| Face Coverings | Pupils Staff | Infection control | <ul style="list-style-type: none"> • From Tuesday 4th January 2022, face coverings should be worn by pupils in classrooms. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons. • All staff, visitors, and students must wear a face covering when moving through corridors and other communal areas, unless exempt. This includes when moving between classrooms and when in the dining hall (except when eating and drinking). • Face masks will be made available for students who do not have access to face coverings appropriate to the school behaviour/ uniform policies. No pupil should be denied education on the grounds that they are not wearing a face covering. • It is recommended that they are worn in enclosed and crowded spaces where you may come in to contact with people you don't normally meet. This includes public transport. • Staff are not required to wear masks when teaching at the front of the classroom but should wear masks when moving around the classroom to speak to students individually or in small groups. • School will follow director of public health advice in cases of local outbreak. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> • Schools put into place any actions or precautions advised by their local HPT. • | | | |
| Ill Health | Staff Pupils Others | Coronavirus Symptoms | <ul style="list-style-type: none"> • Staff are informed of the symptoms of possible coronavirus infection, e.g. a cough, loss or change to sense of smell or taste and high temperature and are kept up-to-date with national guidance about the signs, symptoms and transmission of coronavirus. • Any pupil or member of staff who displays signs of being unwell, such as having a cough, fever or a loss or change to their sense of smell or taste, and believes they have been exposed to coronavirus, is immediately taken out of the class and placed in an area where they will not come into contact with others and are supervised at all times. • For pupils the relevant member of staff calls for emergency assistance immediately if pupils' symptoms worsen. • The parents of unwell pupils are informed as soon as possible of the situation by a relevant member of staff. • Where contact with a pupil's parents cannot be made, appropriate procedures are followed in accordance with those outlined in governmental guidance. • Unwell pupils who are waiting to go home are kept in an area where they can be at least two metres away from others. • Areas used by unwell staff and pupils who need to go home are appropriately cleaned once vacated, using a disinfectant and care to be taken when cleaning all hard surfaces. • If unwell pupils and staff are waiting to go home, they are instructed to use different toilets to the rest of the school to minimise the spread of infection. • Any pupils who display signs of infection are taken home immediately, or as soon as practicable, by their parents – the parents are advised to contact NHS 111 immediately or call 999 if the pupil becomes seriously ill or their life is at risk. • Any members of staff who display signs of infection are sent home immediately and are advised to contact NHS 111 immediately or call 999 if they become seriously ill or their life is at risk. • Any medication given to ease the unwell individual's symptoms, e.g. Paracetamol, is administered in accordance with the Administering Medications Policy. | MED | | ✓ |
| Asymptomatic testing | Pupils Staff | Infection Control | <ul style="list-style-type: none"> • Staff and pupils should test twice weekly at home with lateral flow device kits 3-4 days apart. Testing remains voluntary but is strongly encouraged. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> Schools should also retain a small asymptomatic testing site (ATS) on-site until further notice so they can offer testing to pupils who are unable to test themselves at home. Staff should undertake twice weekly home tests whenever they are on site | | | |
| Pupil Absences due to Covid-19 | Pupils | Infection Control | <ul style="list-style-type: none"> If pupils cannot attend school either because they have tested positive or have symptoms, but are well enough to continue studying, any remote education should mirror that received in the classroom as closely as possible. That should focus on live lessons - alongside time for students to complete tasks independently - for a minimum of five hours a day. | MED | | ☒ |
| PCR Test kits | Pupils Staff | Infection control | <ul style="list-style-type: none"> To be offered only to individuals who have symptoms of COVID-19 and in exceptional circumstances when they may not be able to access testing by the usual routes. Parents/carers should administer tests to those age 11 and under. If providing PCR tests to pupils aged 16 or under, the parents and guardians must be informed. Individuals should not enter premises to collect a PCR kit. | MED | | |
| Contacts of Covid-19/ Positive Cases | Pupils Staff | Infection control | <ul style="list-style-type: none"> Schools no longer need to do contact tracing as close contacts will be identified via NHS Test and Trace. School will support NHS Test and Trace when required to help identify close contacts. All adults who are fully vaccinated (had two jabs) and children aged 5 to 18 years and 6 months (regardless of their vaccination status), identified as a contact of someone with COVID-19 – whether Omicron or not – should take a lateral flow device (LFD) test every day for 7 days instead of self-isolating. Daily testing by close contacts will help to slow the spread of COVID-19. Once notified by NHS Test and Trace as a close contact, all eligible staff, pupils and students should take an LFD each day for 7 days and report the results through the Online Reporting System and to their school. If they test negative, they can continue to attend their school. From Wednesday 22nd December 2021, the 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. Anyone whose LFD test comes back positive or who develops COVID-19 symptoms should self-isolate and take a confirmatory PCR test to verify the | MED | | ✓ |

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| | | | <p>result. If the PCR result comes back positive, contacts must self-isolate. 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. 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 school on or after day 7. Anyone who is unable to take LFD tests will need to complete the full 10 day period of self-isolation from the day they took the positive LFD test. If the PCR result comes back negative, contacts can leave self-isolation but should continue to take LFD tests for the remainder of the 7 days.</p> <ul style="list-style-type: none"> • Anyone over the age of 18 years and 6 months who is not fully vaccinated, must isolate in line with government guidelines if they are a close contact of a positive case. | | | |
| Living in same household with an adult/pupil/sibling with a positive case | Siblings Pupils Others | Spread of infection | <ul style="list-style-type: none"> • You are not required to self-isolate if you live in the same household as someone with COVID-19, whether Omicron or not, (unless they have been identified as a close contact of a suspected or confirmed case of the Omicron variant, irrespective of vaccination status and age) and any of the following apply: <ul style="list-style-type: none"> • you are a fully vaccinated adult (had 2 jabs) • you are below the age of 18 years 6 months (regardless of vaccination status) • you have taken part in or are currently part of an approved COVID-19 vaccine trial • you are not able to get vaccinated for medical reasons • you take a LFD test every day for 7 days • As long as the adult, pupil/sibling is not displaying any COVID-19 symptoms, then the above guidance applies. | MED | | |
| Poor management of infectious diseases | Staff Pupils Others | Lack of infection control | <ul style="list-style-type: none"> • Staff are instructed to monitor themselves and others and look out for similar symptoms if a pupil or staff member has been sent home with suspected coronavirus. • Staff are vigilant and report concerns about their own, a colleague's or a pupil's symptoms to the Headteacher or SLT as soon as possible. . • The school is consistent in its approach to the management of suspected and confirmed cases of coronavirus. • The school is informed by pupils' parents when pupils return to school after having coronavirus – the school informs the relevant staff. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> • Staff inform the headteacher when they plan to return to work after having coronavirus. • A nominated person monitors the cleaning standards of school cleaning contractors and discusses any additional measures required with regards to managing the spread of coronavirus. <p>Contingency framework: education and childcare settings (publishing.service.gov.uk)</p> <p>The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned.</p> <p>For most education and childcare settings, whichever of these thresholds is reached first:</p> <ul style="list-style-type: none"> ➤ 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period: or ➤ 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period <ul style="list-style-type: none"> • For special schools, residential settings, and settings that operate with 20 or fewer children, pupils, students and staff at any one time: • All settings should seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19 by phoning the DfE helpline (0800 046 8687, option 1), or in line with other local arrangements. Hospitalisation could indicate increased severity of illness or a new variant of concern. Settings may be offered public health support in managing risk assessments and communicating with staff and parents. • Settings may wish to seek additional public health advice if they are concerned about transmission in the setting. | | | |
| Lack of communication | Staff Pupils Others | Unsafe Practices | <ul style="list-style-type: none"> • The school staff reports immediately to the headteacher about any cases of suspected coronavirus, even if they are unsure. • The headteacher contacts the local HPT or follows the advice given from and discusses if any further action needs to be taken. • Schools put into place any actions or precautions advised by their local HPT. • Schools keep staff and parents adequately updated about any changes to infection control procedures as necessary. | MED | | ✓ |
| Travel and quarantine | Staff Pupils Others | Infection control | <ul style="list-style-type: none"> • All travellers arriving into the UK will need to isolate and get a PCR test by 'day two' after arrival. They may end their isolation once they receive a negative result. If the result is positive, they should continue to isolate and follow rules on isolation following a positive test. Unvaccinated arrivals aged over 18 will follow the existing, more onerous, testing and isolation regime. | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> All Red list arrivals will enter quarantine. | | | |
| Admitting children into school | Pupils Staff | Infection Control | <ul style="list-style-type: none"> In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others. If a parent or carer insists on a pupil attending your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Your decision would need to be carefully considered in light of all the circumstances and current public health advice. | MED | | ✓ |
| CEV children | Pupils Staff | Infection control | <ul style="list-style-type: none"> The UK Clinical Review Panel has recommended that no children and young people under the age of 18 should be considered CEV and under-18s should be removed from the shielded patient list. Children and young people previously considered CEV should attend school and should follow the same COVID 19 guidance as the rest of the population. They may wish to take extra precautions however. If a child or young person has been advised to reduce their social contact by their specialist, due to the nature of their medical condition or treatment, rather than because of the pandemic, they should continue to follow the advice of the specialist. | MED | | ✓ |
| Admitting people into school | Pupils Staff | Infection control | <ul style="list-style-type: none"> Pupils, staff and other adults should not come into school if they have symptoms, have had a positive test result or have been instructed to quarantine https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/ Anyone staff or pupils within the school who appear to have COVID-19 symptoms are sent home, advised to avoid using public transport and, wherever possible, be collected by a member of their family or household and to follow public health advice In the case of a pupil awaiting collection, they should be taken to a room away from other pupils and supervised If the member of staff is in close contact with the child then they should wear appropriate PPE A window should be opened for fresh air ventilation if possible Any rooms that have been used for this purpose should be cleaned after they have left As anyone within the household should follow the PHE guidance for households with possible or confirmed COVID-19 infection, then any siblings within the school will be identified and also sent home. | MED | | ✓ |

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| Staff CEV | Staff | Infection control | <ul style="list-style-type: none"> CEV people are no longer advised to shield but may wish to take extra precautions to protect themselves and to follow the practical steps set out in the CEV guidance to minimise their risk of exposure to the virus Staff should attend their place of work if they cannot work from home The school will follow DHSC updated guidance https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19 | MED | | ✓ |
| Emergency procedures (fire evacuation and lockdown) | Staff Parents Others | Infection Control | <ul style="list-style-type: none"> Lockdown, fire and emergency evacuation procedures to return to pre-pandemic arrangements Leaders to communicate procedures to all staff and students A fire drill should take place at the earliest opportunity A lockdown drill should be carried out in the autumn term | MED | | ✓ |
| Educational visits | Pupils Staff | Financial risk | <ul style="list-style-type: none"> If booking new visits ensure that the school have adequate financial protection in place From the start of the autumn school term you can go on international visits. The travel list (and broader international travel policy) is subject to change and green list countries may be moved into amber or red. https://www.gov.uk/guidance/red-amber-and-green-list-rules-for-entering-england The travel lists may change during a visit and you must comply with international travel legislation and should have contingency plans in place to account for these changes. The school should have a contingency plan in place to account for any changes in the government travel list Consider whether to go ahead with planned international educational visits at this time, recognising the need to isolate and test on arrival back into the UK. Full risk assessments must be undertaken in line with the Educational Visits Policy, ensure UKHSA advice such as hygiene and ventilation are included in it. Ensure that all risk assessments for visits out of school consider COVID-19 security for the venue being visited. | MED | | ✓ |
| Parents attendance | Pupils Parents Staff Others | Infection Control | <ul style="list-style-type: none"> Parents are no longer limited to specific number attendance. Ensure up to date contact information is available in the event of an emergency. The school is likely to continue to use the digital parents' evening system for efficiency, but there will be provision for parents to attend information evenings | MED | | ✓ |

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| | | | <ul style="list-style-type: none"> No parents should come onto site without a prior appointment or invitation | | | |
| Contractors, deliveries and visitors increase the risk of infection | Staff Parents Others | Infection Control | <ul style="list-style-type: none"> Only essential visitors to be permitted onsite All contractors to be checked to ensure that they are essential prior to entry to school All contractors/visitors to sanitise hands using appropriate hand gel available upon arrival onsite. All contractors/visitors should be made aware of control measures (not arriving if showing symptoms, hygiene requirements) All contractors/visitors to be supervised All contractors/visitors to leave contact details for follow up through track and trace if there are any issues Any contractors who feel unwell on site to report reception and leave the site immediately. Advice from PHE sought. All areas in which contractors work are cleaned in line with government guidance. Staff who receive deliveries to the school to wash hands in line with government guidance after handling. | MED | | ✓ |
| Poor pupil behaviour increases the risk of the spread of infection. | Pupils | Infection Control | <ul style="list-style-type: none"> Pupils are reminded of the behaviour policy on their return to school. Sanctions (and how they will be applied in the context of social distancing) are clearly communicated to pupils and parents. Pupils' individual behaviour plans are reviewed, and specific control measures identified and shared with pupils and staff where necessary. | MED | | ✓ |