RISK ASSESSMENT FORM

	DEPAR	RTMENT/ SE	RVICE		Aire Valle	y Nurse	ry Schools Federation – Stro	ng Clos	e Nursery	School
	ssor/ Person(s) assisting Headteacher with the assessment							DATE	23/08/2020	
	ASK / ACTI n and frequer	VITY hcy of task acti		id-19 Action	plan for th	e openi	ing of school from Thursda	y 3 rd Se	eptember 2	2020
n					1		Persons / g	roups	at risk	
Likelihood		Sev	verity of Outco	ome		Α	Employees	E	Genera	al Public / Pupils
of	1	2	3	4	5	В	New Employees	F		Visitors
Dccurrence	Negligible	Slight	Moderate	Severe	Very Severe	С	Contractors / Sub-Contractors	G	,	Volunteers
Very Unlikely	LOW (1)	LOW (2)	LOW (3)	LOW (4)	LOW (5)	D	Young person / Work	Н	Clients	s / Service users
2 Unlikely	LOW (2)	LOW (4)	LOW (6)	MEDIUM (8)	MEDIUM (10)		experience			
3 Possible	LOW (3)	LOW (6)	MEDIUM (9)	HIGH (12)	HIGH (15)	Likelihood of occurrence X Severity of outcome = Risk Rating				
4 Probable	LOW (4)	MEDIUM (8)	HIGH (12)	HIGH (16)	HIGH (20)	Examp				
5 Very Likely	LOW (5)	MEDIUM (10)	HIGH (15)	HIGH (20)	HIGH (25)	Lik	elihood (possible 3) X Severity (N	Moderate	e 3) = Risk F	Rating (Medium 9

The government guidance states that:-

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Returning to school is vital for children's education and for their wellbeing. Time out of school is detrimental for children's cognitive and academic development, particularly for disadvantaged children. This impact can affect both current levels of learning and children's future ability to learn, and therefore we need to ensure all pupils can return to school sooner rather than later.

The risk to children themselves of becoming severely ill from coronavirus (COVID-19) is very low and there are negative health impacts of being out of school. We know that school is a vital point of contact for public health and safeguarding services that are critical to the wellbeing of children and families.

Lower academic achievement also translates into long-term economic costs due to having a less well-qualified workforce. This affects the standard of living that today's pupils will have over the course of their entire life. For many households, school closures have also affected their ability to work. As the economy begins to recover, we need to remove this barrier so parents and carers can return to work. Given the improved position, the balance of risk is now overwhelmingly in favour of children returning to school. For the vast majority of children, the benefits of being back in school far outweigh the very low risk from coronavirus (COVID-19), and this guidance explains the steps schools need to take to reduce risks still further. As a result, we can plan for all children to return and start to reverse the enormous costs of missed education. This will be an important move back towards normal life for many children and families.

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We are, therefore, asking schools to prepare to welcome all children back this autumn. While coronavirus (COVID-19) remains in the community, this means making judgments at a school level about how to balance minimising any risks from coronavirus (COVID-19) by maximising control measures with providing a full educational experience for children and young people. Schools should use their existing resources to make arrangements to welcome all children back.

This document has been completed by referring to the relevant national guidance documents of:-

- 1. Planning guide for early years and childcare 27th July 2020
- 2. Implementing protective measures in educational and childcare settings-1st June 202
- 3. Supporting children and young people with SEND as schools and colleges prepare for wider opening- 24th July 2020
- 4. Safe working in education, childcare and children's social care settings, including the use of PPE- 21st July 2020
- 5. Cleaning in non-healthcare settings- 15th July 2020
- 6. Actions for EY and childcare providers during the coronavirus outbreak- 27th July 2020
- 7. What parents and carers need to know about early years providers, schools and colleges in the autumn term-31st July 2020
- 8. Guidance for full opening: schools 7th August 2020
- 9. EYFS coronavirus disapplications -28th July 2020
- 10. Conducting a SEND risk assessment during the coronavirus outbreak-7th May 2020
- 11. Protective measures for out-of-school settings during the coronavirus (COVID-19) outbreak and guidance for parents-10th July 2020
- 12. How schools can plan for tier 2 local restrictions 28th August 2020

And also:-

- Strong Close Nursery School Health and Safety Site visit report by Lyn Sayles, Bradford Occupational Health and Safety Team, who will continue to monitor this risk assessment in practice.
- -Consultation with Bradford Council's Building Control Surveyor & Senior Fire Safety Officer.

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System of controls

This is the set of actions schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the sections below.

Prevention:

To be in place in all schools, all the time.

1) Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school

2) Clean hands thoroughly more often than usual

3) Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach

4) Introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach

To be properly considered and schools must put in place measures that suit their particular circumstances:-

5) Minimise contact between individuals and maintain social distancing wherever possible

To apply in specific circumstances;-

6) Where necessary, wear appropriate personal protective equipment (PPE)

Response to any infection:

7) Engage with the NHS Test and Trace process

8) Manage confirmed cases of coronavirus (COVID-19) amongst the school community

9) Contain any outbreak by following local health protection team advice

Numbers 7 to 9 must be followed in every case where they are relevant.

Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
Site Access-Staff arrival, children's arrival and numbers of entrances open, security and social	A - H	Opening of main entrance door controlled by school staff to ensure social distancing. Staff, patents/carers and families to adhere to 2 metre social distancing rules on entry into and exit from school.	15	Staggered start and finish times for each entrance group and set of sessions. Social distancing signs, lines or barrier markers outside and circular signs inside to ensure 2 metre spacing on entry to the	6

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distancing, visible guidance, lines on ground, signs etc. Start and finish times. See also social distancing and pupil well- being.		 Main entrance- red and green group children dropped off by one parent/carer in the entrance one at a time and wash hands on entrance to nursery rooms Back entrance - blue and yellow group children dropped off by one parent/carer one at a time and wash hands in the outdoor sink. Supported to their classroom by a member of staff. SLT on the entrances to admit one at a time. Parents/carers not allowed into the main part of the building unless essential to children's well- being It is not necessary to take children's temperatures on entry or throughout the day unless there is a concern. Every child should wash their hands with soap on entry to the class room at the front entrance and in the outside sink at the back entrance for at least 20 seconds with staff support and singing the handwashing song. Hands should also be washed regularly throughout the day, before and after eating, when children leave and after using a tissue as part of the NHS's Catch it, Bin it, Kill it strategy. Walkie talkie operation in each room checked daily as part of the usual daily risk assessment. This is important for communication but especially from the office. Staff to confirm receipt 		 building. Staff and visitor pause, protect, proceed instruction signs prior to entry with hand sanitiser dispenser outside the entrance door and hand sanitiser at back entrance Limit of one parent/carer at drop off and pick up. Supplementary staff to support and marshal entry and exit at key times. Lead member of staff with an overview register to monitor entry and exit. Admin to check registers at door of room at 9.30 and 1.30 each day. Information during and at the end of the day to be conveyed verbally and /or digitally by email, text, through the administration team. Any other information to sign left on green chairs in front entrance or in the to sign box for the back entrance. PHE is clear that routinely taking the temperature of children is not recommended as this is an unreliable method for identifying coronavirus (COVID-19). Walkie Talkies- Staff to confirm receipt of information from the office by stating "Message received." 	

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		of information from the office by stating "Message received."			
Infection Control- see also cleaning and social distancing	A-H	Every child should wash their hands on entry to the class room for at least 20 seconds with staff support and singing the handwashing song. Children and staff must clean their hands regularly, including: • when they arrive at the setting • when they return from breaks • when they change rooms • before and after eating Regular and thorough hand cleaning is needed for the foreseeable future. Hand sanitiser in entrance vestibule area for use by staff, visitors and parent/ carer. Admin staff to keep glass window closed between office and reception area. Only to be opened to accept paperwork /deliveries. Desks, telephones and workstations to be cleaned with virucidal spray before and after use. Staff to avoid touching their face. Staff to have their own 50 ml hand sanitiser kept securely for immediate personal use when needed. Regular hand washing with soap for at least 20 seconds by staff and or use of hand sanitiser, but especially on entry and exit and before and after eating. 500 ml hand sanitiser also available in each classroom office and the staff room. Staff to use their own pens.	12	Hand washing routines must be built into everyday school culture, and staff to ensure younger children and those with complex needs understand the need to follow them. Skin friendly cleaning wipes can also be used as an alternative. Hand sanitiser dispenser installed under the canopy of the entrance outside for staff, parents/carers and visitors to use prior to entry. Lidded (and where possible foot pedal operated lidded bins) available in each room. Catch it, bin it, kill it visual signs on all lidded bins. Bins are emptied at lunchtime as well as the end of the day and again if there is a suspected corona virus case in school- see also Cleaning after a suspected or confirmed case of Coronavirus. Acrylic sheet to protect office staff at sliding window when window is open. Staff in each group to ensure cleaning station boxes are replenished Some children and young people with special educational needs, may be unable to follow social distancing guidelines, or require personal care support. In these circumstances, staff need to increase their	6

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		Visitor pens to be cleaned after each use by office staff A good supply of disposable tissues to be available in all areas to ensure implementation of the "Catch it, bin it, kill it." Strategy from NHS England. Keep windows and or ventilation vents on outside doors open in all occupied areas as much as possible to ensure ventilation and use outdoor areas as much as possible. Avoid the use of lifts wherever possible. If anyone in the setting has symptoms of coronavirus (COVID-19): -a high temperature, -new and persistent cough or -a loss of, or change in, normal sense of taste or smell (anosmia), however mild, they should self-isolate for at least 10 days from when their symptoms started ; or if they are not experiencing symptoms, but have tested positive for coronavirus (COVID-19), they should self-isolate for at least 10 days starting from the day the test was taken . If they have tested positive whilst not experiencing symptoms , but develop symptoms during the isolation period, they should restart the 10 day isolation period from the day they develop symptoms .		level of self-protection, such as minimising close contact (where appropriate), cleaning frequently touched surfaces, and carrying out more frequent handwashing. As part of the NHS Test and Trace process staff members and parents/carers will need to be ready and willing to: -b <u>ook a test</u> if they are displaying symptoms. Staff and children must not come into the setting if they have symptoms and must be sent home to self-isolate if they develop them in the setting. All children can be tested, including children under 5, but children under 11 will need to be helped by their parents or carers if using a home testing kit -provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace - <u>self-isolate</u> if they have been in close contact with someone who tests positive for coronavirus (COVID-19) symptoms Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS website, or ordered by telephone via NHS 119 for those without access to internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing. Parents, carers and staff to immediately	

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		Face masks- Face masks do not protect the you, but protect other from your coughing/sneezing. Schools should ensure removal of face coverings by the person or parent/carer when pupils and staff who use them arrive at school and communicate it clearly to them. Pupils, staff and parent/carers must be instructed not to touch the front of their face covering during use or when removing it. They must wash their hands immediately on arrival (as is the case for all pupils), and staff/ parent/carer dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they can take home with them.		inform the school of the results of the test: - if someone tests negative, and they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self- isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can also stop self-isolating -if someone tests positive, they should follow <u>COVID-19</u> : guidance for households with possible coronavirus infection and should continue to self-isolate for at least 10 days from the onset of their symptoms and then return to the setting only if they do not have symptoms other than cough or loss of sense of smell or taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 14 days.	
Cleaning- increased cleaning needed	A-H	Deep clean the kitchen prior to opening before food preparation resumes. Kitchen will be locked each day after the kitchen assistant has left. All frequently touched surfaces, equipment, toys, books, light switches, door handles and plates, grab rails in corridors and stairwells, toilets and sinks used during the day both inside and outside	12	If during a fire the kitchen needs to be accessible as an exit the key is available in the smash glass container at the side of the door. Cleaning company to use the virucidal steam deep cleaning system each evening and clean toilets and frequently touched surfaces	6

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		 to be cleaned thoroughly and more frequently each day with virucidal spray. Stringent cleaning for food preparation and dining areas and/or table coverings in classrooms with virucidal spray. Cleaning box stations in each office, toilet and classroom. Specific cleaning box station with extra PPE in each isolation area. Remove unnecessary items from learning environments, where there is space to store them elsewhere. Remove all soft toys, toys that are hard to clean, such as those with intricate parts, soft furnishings e.g. pillows, cushions, bean bags and rugs. Ensure any toys that are shared can easily be cleaned between groups use. Kitchen food deliveries to be supplied as normal through the kitchen side entrance ensuring social distancing rules. Snack deliveries to be separated for each class group. 		 at lunchtime and the end of the day in addition to their other duties. When using virucidal spray leave on the surface for 20 seconds before wiping down. Staggered lunchtime to enable thorough cleaning of areas. Each class to have their own hand held steam cleaner for cleaning with virucidal solution in all areas needed but especially of toys such as wooden blocks. To be used with a fluid resistant face mask for protection which can also be re-used in these circumstances as detailed by Lyn Sayles. All items that are laundered e.g. towels, flannels, bedding are not shared by children between washes Communicate to staff and parents that items and toys should not be brought into school unless absolutely necessary, in which case the items should be appropriately cleaned on arrival e.g. soothers and dummies. All procedures covered on staff training sessions. 	
Cleaning after a suspected or confirmed case of	A-H	Cleaning should be completed of all affected areas with PPE to be worn-disposable gloves,	15	Staff training on these cleaning procedures and the correct use and take off of a mask and PPE equipment.	9

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Coronavirus. See also Response to suspected COVID- 10 case -		 apron, blue fluid resistant deposable surgical mask, and eye protection. Disposable cloths or paper roll and mops should be used and disposed of as detailed below. On disposal these and all PPE should be tied and double bagged, then marked and stored securely for 72 hours or until the individual's test results come back as negative, Then the waste can be thrown away in the external council bins. Hands should be washed with soap and water for 20 seconds after all PPE has been removed Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors but which are not visibly contaminated with bodily fluids can be cleaned thoroughly as normal. Dirty laundry that has been in contact with an unwell person can be washed with other people's items. Do not shake dirty laundry, this minimises the possibility of dispersing the virus through the air. Clean and disinfect anything used for transporting laundry with virucidal spray. 		Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be double bagged, in the white waste bags, date labelled on it with a permanent marker, then stored securely for 72 hours outside in specified container area before being thrown away in the external council bins.	
Social Distancing - For example, staggered social times, children and	A-H	Brief, transitory contact, such as passing in a corridor or when moving to a different part of the school is low risk, but wherever possible staff will	12	Make up of children and staff in each year group will be shared on staff training sessions and then with registers and specific individual risk assessments.	6

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staff working in 'pods', one way systems, entrances and exits		only move one group at a time using one way circulation. Staggered lunch breaks for staff and children. Staggered start and finish times for each group and set of sessions. Ensure that classroom toilets do not become overcrowded by limiting the number of children that use the toilets at any one time. Office workstations spaced out and desks moved to ensure 2 metre social distancing system with increased staff in school. No more than three people in the main office at any one time. New electronic fob system programmed to only allow access to office by admin and leadership staff.		The use of communal spaces in settings will be managed to limit the amount of mixing between groups as much as possible. In communal adult areas such as staff room and offices, available chairs are measured to ensure 2 metre social distancing. Children in the early years cannot be expected to remain 2 metres apart from each other so staff. ensure:- -reduction in close face to face contact with children e.g. cuddle from behind. -parents are advised to keep children with any symptoms at home. -staff who are symptomatic do not attend work and are tested. - frequent hand cleaning and good respiratory hygiene practices of catch it, bin it, kill it. -regular cleaning of setting. -minimising contact and mixing. On sunny days sun lotion to be applied by parents/carers prior to school drop off and where possible include 20 minute exposure without sun lotion first for benefits of vitamin D. Staff to re-apply sun lotion when needed using disposable gloves which are changed with each child.	
Pupil Well-being - See also Parent	E	All children who normally access education and childcare are strongly encouraged to attend so	12	Refer to Safeguarding Policy addendum and Learning and Teaching Policy During Covid-	6

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and family well- being and Access for Learning.		that they can gain the learning and wellbeing benefits of early education. Parents/carers are not allowed into the building unless essential to children's well- being. As some children will not have been attending for a number of weeks or will be starting for the first time and may be feeling anxious, work with parents/carers, children and familiar staff to support this process. Staff to plan how all children will be supported to address the specific issues that may have arisen due to coronavirus, taking into account children's individual needs and circumstances. The coronavirus outbreak may have caused significant mental health or wellbeing difficulties for some children. Be alert to harm that may have been hidden or missed while they have not been attending settings. Consider the mental health, pastoral or wider health and wellbeing support children may need, including with bereavement, and how to support them to transition into the setting after a long period of absence. Shielding advice for all adults and children will pause on 1 August, subject to a continued decline		 19, including online Learning and Teaching already shared with staff. SEND policy. Updates to policies to be emailed to staff as they occur. School will work with local authorities, midwives and health visitors where relevant, to monitor the welfare of vulnerable children who are not attending provision, and other children they may wish to keep in touch with for safeguarding purposes. Involve parents and carers to identify specific support for children and how children's needs may have changed and to prepare for their return to your setting. Use the more in depth All About Me template from the LA for those children/ parents needing extra support after Lockdown and the SSIF Leuven well being scales and Tiny Little Minds website to support any concerns. 	
		in the rates of community transmission of coronavirus (COVID-19). This means that even the small number of children who will remain on the shielded patient list can return to settings, as can those who have family members who are shielding. The current shielding advice is available at <u>Guidance on shielding and protecting</u>		updated and adapted and shared with their staff and senior leadership. Parents / Carers will continue to be involved through standard (phone, text, email, post and socially distanced conversations) as well	

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		people who are clinically extremely vulnerable from Covid-19 If rates of disease rise in local areas, children (or family members) from that area, and that area only, will be advised to shield during the period where rates remain high and therefore may be temporarily absent (see below)		as virtual communication, in planning and agreeing any changes to support for children with needs including EHC plans. Sleeping children should be spaced apart on the wipe down mats. All bedding to be washed immediately. A very small number of children no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to the settings, usually at their next planned clinical appointment. You can find more in <u>Shielding guidance for children and</u> <u>young people</u> from the Royal College of Paediatrics and Child Health (RCPCH)	
Staff well-being	AB	Existing staff well-being training from January 2020 and Coronavirus wellbeing training and feedback from May and September2020 in relation to <u>https://www.nhs.uk/oneyou/every-</u> <u>mind-matters</u> Regular staff contact by text, email and phone through line management. Virtual team meetings. Existing programme of staff well- being and positive mental health support and training. While further research is awaited, protecting those who are at higher risk (male, older, BAME and pregnant, those with pre-existing health	12	PPE is will be needed for children whose care routinely already involves the use of PPE, or if a distance of 2 metres cannot be maintained from any child displaying coronavirus symptoms. See also Response to suspected COVID-10 case - And Cleaning after a suspected or confirmed case of Coronavirus Coronavirus staff well- being and positive mental health training and staff feedback questionnaire. In addition all staff to feedback on any issues during wider opening training for risk assessment or other procedures as they arise.	6

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		conditions as well as the group where several factors intersect) will benefit all staff, and services. Individual risk assessment will be completed as required. The scientific evidence shows that the majority of staff will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others. There is no need for anything other than normal personal hygiene and washing of clothing following a day with no concerns in school.		Cleaning boxes to be added to adult toilets. Red group staff to use the toilet downstairs. Green, Blue and yellow group and admin/other staff to use the main toilets upstairs. <u>The disabled toilet upstairs is not to be used by school staff</u> - this is for use by midwife clinics only. Although there is no evidence to suggest that Vitamin D gives specific protection against COVID-19 or prevents complications associated with the virus, low levels of Vitamin D may predispose to severe infection. Staff should be made aware they can get their Vitamin D levels tested, especially BAME staff members. Vitamin D supplements and exposure to sunlight for 20 minutes without sun lotion is advised if vitamin D levels are low. Latest council BAME risk assessment conducted with all BAME staff. Written messages to a bubble to be passed under the door when staff alerted to come to the door by walkie talkie message.	
Parent and family well-being	EH	What's Happening / at home and free resources for you and your child, already in place with home learning support, staff videos of stories and songs, regular information including on Safeguarding and mental health and well-being	12	Letter to parents regarding return to school with details of new routines and specific support for children emotional well- being and support for specific needs. Parents / Carers will continue to be involved	6

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		support available from either school or the local authority. Families at home contacted weekly and signposted to the website, and Facebook pages, Early Essence as well as regular texts and letters with updates on information. Parent letters and communications sent out prior to starting with advice and links to the back to school safely campaign <u>https://www.gov.uk/government/publications/what- parents-and-carers-need-to-know-about-early- years-providers-schools-and-colleges-during-the- coronavirus-covid-19-outbreak</u>		 through standard (phone, text, email, post and socially distanced conversations) as well as virtual communication, in planning and agreeing any changes to support for children with needs including EHC plans. Socially distanced and /or virtual review meetings to be arranged. Families signposted to multi-agency working and relevant information such as family hub initiatives or the relationship matters website. Staff and the parental Involvement Officer to plan virtual coffee morning groups, welcome 	
Access to learning	E	The priorities at this time are helping young children to adapt to their new routines and supporting children to settle back into the setting, especially where there have been staffing changes. Continuing to support their early language and communication skills is essential. Children who have had limited opportunities for exercise should be encouraged to exert themselves physically. The school will use reasonable endeavours to deliver the EYFS learning and development requirements as far as possible in the current circumstances, as set out in EYFS coronavirus disapplications. Stories, singing and games will be used to help children to socialise and resettle into familiar everyday routines. Opportunities to	12	 and parent forum meetings. Public health advice is that, as sand pits cannot be thoroughly cleaned between uses, they should not be used at this time. Outdoor space will be planned for as much use as is possible as this can limit transmission. Avoid using tablets with children. Tablets used by staff must be cleaned before and after each use. Take home library to be stored and replaced with messages and the Julia Donaldson story ditties with links to coronavirus. Readjustment to the routines in a setting may prove more challenging for under 3s and some children with SEND, Therefore staffing ratios are higher in these groups to 	6

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Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
		continue our project and schema books and displays will continue to be developed. Staff will plan how children can learn in age- appropriate ways about how they can keep themselves safe, including regular handwashing and using tissues. This will be achieved through games, songs and repetition. See also annex B of the planning guide for early years and childcare. What's Happening at Home will continue to provide parents/carers with relevant learning support for their children including staff videos on stories and songs and links to relevant early years sites including Hungry Little Minds, the BBC's Tiny Happy People, the 50 things to do before your 5 app and https://literacytrust.org.uk/family-zone/birth-4/. Over time once children are settled, have even smaller group sessions where social distancing can be achieved using named thin carpet shape mats. Initially practitioner only sessions will be videoed for links with other families at home until and unless GDPR and permissions can be checked for wider sharing of group sessions.		support the children in their care. The progress check at age 2 will not need to be undertaken during the coronavirus outbreak. However staff should still remain alert to any emerging concerns about any child in their care and provide or seek additional support if needed.	
Safeguarding	A-H	Responsibilities in respect of safeguarding haven't changed, referral routes should remain the same. Staff will need to identify and support any vulnerable children and parents that return to settings, for example, by reporting to the safeguarding lead on duty so that they can be	12	Refer to Safeguarding Policy addendum and Learning and Teaching Policy During Covid- 19, including online Learning and Teaching already shared with staff, attendance policy and SEND policy School will work with local authorities,	6

Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
		signposted to appropriate local services such as health visitors, mental health services, and domestic or substance abuse services, and school nurses where applicable. Registers of attendance monitored by Headteacher and LA Parents and carers contacted by phone if not attending school. Information about vulnerable children gathered prior to start dates for external children. Registers monitored by SLT and returned to DfE and LA daily.		midwives and health visitors where relevant, to monitor the welfare of vulnerable children who are not attending provision, and other children they may wish to keep in touch with for safeguarding purposes. Staff to be aware of concerns that may arise with families where previously we didn't have any concerns. Staff training on safeguarding and Keeping Children Safe in Education prior to opening	
Communication - How does communication need to change? Parents/children without IT access.	EH	Ensure that emergency contacts are updated in advance of wider opening. Parents and carers to be contacted by text, phone and letter at relevant stages of planning, ensure they understand their role and will be available to collect their child if necessary. New trial admission forms to include parent/carer email details to aid smoother communication with home. Details of emails of parent/carers for existing children on roll to be obtained in the first week. Ensure that all parents and carers understand that if a child has coronavirus symptoms, or there is someone in their household who does, they should not attend the setting under any circumstances. Ensure parents and carers are aware that all children attending the setting, and members of their household, will have access to a test if they display symptoms of coronavirus	12	 Bi- lingual staff and translation resources may be needed to ensure correct understanding of all the new procedures for opening. Anything for parents to sign at pick up to be put on a clipboard on the green chairs in the front entrance and in a signing box for the back entrance. Ensure parents are aware of all new measures put in place to reduce risk of transmission of coronavirus, how this impacts them and their responsibilities in supporting this. 	6

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Category of hazard	Affected persons groups	rsons What are the existing control measures ra		Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
		and they are encouraged to get tested in this scenario.			
Visitors on site - Managements of planned and unplanned visits to site	A-H	External visitors to the setting are limited and only come into the building when strictly necessary, for essential services or essential support for a child's well-being. Contractors Induction in place. New parents are permitted to enter the provision on the first two days and there after must drop off and collect their children where possible. Where the school needs to use other essential professionals such as social workers, speech and language therapists or counsellors, or professionals to support delivery of a child's EHC plan, settings should assess whether the professionals need to attend in person or can do so virtually. If they need to attend in person, they should closely follow the protective measures in the setting, and the number of attendances should be kept to a minimum. Where possible to do so, social distancing should be maintained.	15	Midwife and contact appointments to be arranged around staggered drop off and pick up and planned with appropriate service leads. If in car to wait in car until called by midwife/ contact supervisor. Disabled toilet upstairs to only be used by midwives clients. Alternative non cloth chairs to be arranged for the waiting area. See also risk assessment from the midwifery service.	9
Response to suspected COVID- 10 case - See- implementing protective measures in education and	A-H	 If a child or staff member displays COVID symptoms they should be sent home from the school. Contact parent/carer immediately. Isolate child with appropriate adult supervision until collection – PPE should be worn if social distancing cannot be maintained (care needs or 	15	The designated isolation area is the leadership office. Ensure the window is opened for ventilation. The designated isolation toilet area is in red room 2. Toy box with toys that are easy to clean in both areas. A blue fluid resistant face mask must be	9

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Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
childcare settings/ cleaning in non- healthcare settings See also Cleaning after a suspected or confirmed case of Coronavirus.		 age of child) 3. You should move children and staff from affected area to enable cleaning-see cleaning after a suspected case. 4. If life at risk or injury call 999 5. Members of staff who support children who are unwell do not need to go home unless they display symptoms or the child subsequently tests positive. 6. Members of staff should wash their hands following contact with the child 7. You do not need to inform other parents and carers of suspected cases 8. The child should isolate for 10 days (14 in the case of Early Years as they are reliant on a household member to bring them to school) and immediate household members for 14 days and advice 		 worn by the adult, eye protection, disposable apron and gloves. Once the child or member of staff has left the setting follow Cleaning after a suspected or confirmed case of Coronavirus All staff and children that display symptoms should be tested for COVID-19. If the test is negative they can return to school. If positive see the next section. Staff training sessions on response to suspected case. 	
Response to confirmed COVID- 19 case - See- implementing protective measures in education and childcare settings.	A-H	When aware that someone who has attended has tested positive for coronavirus (COVID-19), the school will contact the local health protection team. This team will also contact settings directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the setting – as identified by NHS Test and Trace. The local health protection team will work with the school to carry out a rapid risk assessment to confirm who has been in close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate. The local health protection team will work with the	15	Consider changes needed to staff rotas including cover for safeguarding lead, first aid or SENDCo. The situation will be risk assessed by the Headteacher and Governing body. A template letter will be provided to the school, on the advice of the local health protection team, to send to parents, carers and staff if needed. The school will not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.	9

hazard	ffected ersons jroups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
		 school in this situation to guide them through the actions they need to take. Based on the advice from the local health protection team, the school should 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 1-2m for more than 15 minutes) with an infected individual -travelling in a small vehicle, like a car, with an infected person The local health protection team will provide definitive advice on who must be sent home. To support them in doing so, we recommend settings keep a record of: close contact that takes places between children and staff in different groups/rooms This should be a proportionate recording process. Settings do not need to ask staff to keep definitive records in a way that is overly burdensome. 		 Household members of those who are sent home do not need to self-isolate themselves unless the child or staff member who is self-isolating subsequently develops symptoms. If someone in a group that has been asked to self-isolate develops symptoms themselves within their 14-day isolation period, they should follow <u>COVID-19</u>: <u>quidance for households with possible</u> <u>coronavirus infection</u>. They should get a test, and: if the test delivers a negative result, they must remain in isolation for the remainder of the 14-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days if the test result is positive, they should inform their setting immediately, and should isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation period). Their household should self-isolate for at least 14 days from when the symptomatic person first had symptoms, following <u>COVID-19</u>: quidance for households with possible coronavirus infection The school should not request evidence of negative test results or other medical evidence before admitting children or 	

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Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
				 welcoming them back after a period of self-isolation Further guidance is available on <u>Testing and tracing for coronavirus</u>. If settings have two or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, settings may have an outbreak, and must contact their local health protection team who will be able to advise if additional action is required. In some cases, health protection teams may recommend that a larger number of other children self-isolate at home as a precautionary measure – perhaps the whole site or a group. If settings are implementing the controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole setting closure based on cases within the setting will not generally be necessary, and should not be considered except on the advice of health protection teams. 	
Policies and Procedures-	A-H	Consider all policies and procedures relevant to the day to day running of your school and whether an appendix should be added in the context of COVID-19. Ensure policies are revisited with staff and any additions and changes are highlighted. AVNSF Review First Aid Policy, Fire Safety, COSHH, Premises Management, Child Protection and Safeguarding Policy, Staff Well-being Policy,	12	Emailed to staff prior to staff training and ongoing.	6

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Category of hazard	rd groups		Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
		Bereavement Policy, <i>Health and Safety Policy, SEND policy, sickness management.</i>			
Site Safety- Electrical supply systems and equipment, heating and ventilation, hot and cold water and fire alarm systems	A-H	 Existing regular checks of electrical supply systems and equipment, heating and ventilation, and hot and cold water systems through Bradford Council Facilities Management. Weekly flushing of all unused water systems in the building with ventilation by cleaning and caretaking staff. Dishwashing cycles run on a weekly basis. Where possible, windows should remain open in rooms that are occupied. Electrical systems have remained in use. Weekly fire tests have continued throughout partial opening and the holidays. 	12	Water fountains in the classroom to be taped off/ removed/ disconnected. Further safety checks on systems completed by the council's Health and Safety Team. Catering equipment checks by ECS initially. Aqua trust before opening.	6
Fire Safety	A-H	Existing measures in place for evacuation and assembly in the outdoor area-see evacuation plans, maps and health and safety policy. Guidance to staff on decisions around what becomes the greater risk in the ability to socially distance during evacuation if there is a risk of fire.	12	Back car park not to be used by staff and blue and yellow groups to assemble in the marked areas in the back car park to enable wider assembly spacing between groups/pods. New laminated signs put up outside to make colour group assembly areas clear. Ensure a fire evacuation procedure is planned, explained and practiced. Record and implement any amendments needed from drills.	6

Category of hazard	Affected persons groups	What are the existing control measures	Risk rating (refer to chart)	Further action required to eliminate or reduce the risk (who by and Date)	Residual risk rating (refer to chart)
Invacuation and Lockdown-	A-H	Existing Invacuation plans in place for lockdown in each room. Guidance to staff on decisions around what becomes the greater risk in the ability to socially distance during invacuation and lockdown if there is a risk to safeguarding.	12	Walkie talkies to be moved between outside and inside as each group moves. Where possible children to sit /stand spaced out near member of staff. Consider games and songs to use with children until the all clear is given. Ensure invacuation and lockdown procedure is planned, explained and practiced. Record and implement any amendments needed from drills.	6

Part C

Links to other risk assessmen instructions - please state	ts and or safe working			
Name and	Sign	Helen Jones H	eadteacher	Date
When the assessment is complete it should be signed to say that is the case and all identified actions have been implemented				23/08/202
Review - Before work starts, it is im				·
For example, are there any signification	int changes, additions or omis	ssions at the site	not identified on the assessment? Are there any addit	ional hazards or risks?
Please record any changes required	d and or action taken, then da	ate and sign		
Reviewer Name & Date		Notes		
Reviewer Name & Date		Notes		
Reviewer Name & Date		Notes		
Reviewer Name & Date		Notes		

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