Catalyst Academies Trust	RISK ASSESSMENT FORM – Key Worker and Vulnerable children attending school during Lockdown 2021					Form Number: HSF003 Version: 1.0 Date: Jan 2013 Procedure: HSP 5.0		
Location/Site: Catalyst Schools- Aveley Primary		Date of Assessment: Initial - 19 <sup>th</sup> May 2020 Updated 05.01.2021 Updated 20.01.2021	Assessor(s): Trust SLT	Reference: A	veley Prin	nary		
Activity/Task/ Situation	What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom	Action by when	Completed	
Attending Critical Worker Provision/EHCP/ Vulnerable Children Provision	Resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Children and their families attending the provision must have a covid test and provide a negative test result before attending the provision.</li> <li>Children and their families will need a new test following a period of absence or following isolation following a bubble closure.</li> <li>Maximum number of children on site limited to 36.</li> </ol>					
Lack of social distancing in the classroom	Resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Reduce the number of children in the classroom to enable social distancing (no more than 15)</li> <li>Children grouped in Key Stage bubbles. Year group bubbles within the larger bubbles (YR – Y3 and Y4 – Y6)</li> <li>Remove excess furniture to increase space if there is space to do so</li> <li>Children keep to their desks when in the room</li> <li>Social distancing rules created for and with the children – (Include instructions how to line up, use of toilet, moving around the classroom etc.)</li> <li>Rule re-visited and modelled many times a day and linked to school behaviour system – lots of praise for adherence and sanctions for non-compliance</li> <li>Children initially spoken to and isolated if cannot adhere to rules and spoken to re the need for social distancing</li> </ol>					

			8. Children to attend the on-line learning for	
			their own class.	
			9. Additional lessons/activities planned for	
			individual work where necessary	
			10. Feedback – mostly via the teacher on line.	
			Some verbal sometimes including the use of	
			a large whiteboard and/or visualizer and/or	
			interactive whiteboard not close interaction	
			11. Work and resources are distributed at the	
			start of the lesson or from a central	
			collection point, not given out by staff or	
			children.	
			12. Mark out an area for the teacher – 2m	
			distancing at front of room	
			13. Mark out pathways to move through the	
			room if practicable	
			14. Children to use own tray of resources on	
			the same desk if returning next day (these	
			will be cleaned at the end of day and left	
			overnight)	
			15. Teachers/ LSTs are assigned to these	
			children and stay with these children	
			throughout the day (and on subsequent	
			days)	
			16. Children stay in the classroom for majority	
			of the session and do not mix with other	
			groups/bubbles	
			17. Classrooms to be well ventilated, doors	
			and windows open as appropriate.	
Lack of social	resulting in	Children	1. One child allowed to go to toilet at a time	
distancing using	direct and	Staff	2. Allocated toilets for different	
toilets and poor	indirect	Families	groups/bubbles of children to avoid cross	
hygiene	transmission	Wider Community	contamination	
	of the virus		3. Children regularly reminded of good hand	
			hygiene (through visual displays and from	
			staff) and soap is available at all sinks 4. Extra signs in toilet re washing hands	
			5. Wedges for the toilet external doors if not	
			fire doors	
			6. Only disposable towels to be used and	
			disposed of in a lidded bin	

Lack of social distancing waiting to enter classroom in morning	resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>7. Enhanced cleaning of toilets in place (3 times a day)</li> <li>8. Staff toilets will only be used by one person per 'block' at a time to adhere to social distancing</li> <li>9. Staff will need to wash their hands thoroughly after using the toilet</li> <li>10. Staff waiting to use the toilets will need to wait in the corridor at least 2m apart</li> <li>11. Children encouraged to use the toilet before and after any outside play so as to avoid children entering and exiting building multiple times</li> <li>1. Adults reminded by sign at front entrance gate that wearing of face masks is required whilst on school site.</li> <li>2. Markers outside the classrooms for the children and parents to wait – more than 2 metres apart as more than one person</li> <li>3. Allocated gate for children to arrive and leave from</li> <li>4. Instructions shared re social distancing between families in the morning with parents and children</li> <li>5. Signage for parents and children displayed outside on the entrance gates</li> <li>6. SLT to be on duty to supervise and remind parents of expectations where necessary</li> <li>7. All staff on gates, outside or on doors to wear face masks</li> <li>8. All parents/carers/visitors to wear masks while on site; arrangements by staff member for those that are exempt. Letters to confirm arrangements.</li> <li>9. Rec- Yr. 3 Bubble 1 to enter via Lime class gate. Rec- Yr. 3 Bubble 2 and Yr. 4-6 to enter and exit via KS1 gate.</li> <li>10. EHCP bubble enter via Lime class gate and based in Rm 10.</li> </ol>	On collection parents may be briefly asked to show face if child is unsure of adult identity.			
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Lack of social distancing during playtimes and lunchtimes	resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Key worker children eat in their classrooms at the same desk or space used during lessons</li> <li>Key worker children asked to bring packed lunch in, packed lunches kept on the trolley and children only to pick up their own lunchbox (Staff not to touch)</li> <li>Designated playground areas to avoid cross contamination</li> <li>Adults from bubbles to supervise their own bubble</li> </ol>
Lack of social distancing in the corridors	resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Children staying in their classroom and accessing outside from classroom door</li> <li>One child going to toilet at one time</li> <li>Messages to office via phones/ email</li> <li>Share instructions with children concerning going and returning to toilet</li> <li>When moving class around the school – 1m+ between children/ adults 2m – one adult at back insisting the distance is maintained – regular practice of this in the first few days, visual markers such as spots can be used.</li> <li>One-way system around the school using walkway and outside</li> <li>Signage will make route around school clear</li> </ol>
Contact of shared resources	resulting in indirect transmission of the virus	Children Staff Families Wider Community	1. Children to have any necessary packs of stationary (labelled with their name on)       2. Children have a tray on the desk that contains any work and resources that may be needed for the day       4. Resources washed in Milton each night and left to dry if not same person using them the next day       4. Tables, door handles and other surfaces cleaned with appropriate cleaning between group timings (lunchtime) and every night       5. Any additional lessons/activities planned so resources are individual and not shared necessarily – or on white board       6

Emotional distress of the children – especially those with an EHCP/identified as vulnerable.	Emotional distress	Children Staff Families Wider Community	<ul> <li>6. Resources on tables ready for lesson and not distributed within the lesson</li> <li>7. Trays used for individual resources</li> <li>8. Children encouraged to wash hands / use hand sanitiser before and after each lesson</li> <li>9. Staff will not handle sheets or other resources children have touched unless necessary. They will wash their hands thoroughly after touching any items</li> <li>1. Children to be introduced to staff members to ensure familiarisation</li> <li>2. Small numbers of children to support their emotional need</li> <li>3. PSHE curriculum that supports emotional well-being, worries and fears</li> <li>4. The structure of the day and routines explained clearly by staff to reduce anxiety</li> <li>5. Contact maintained with class teacher via TEAMS</li> <li>6. Social stories prepared for those children that may require it and/or all the children on returning if appropriate</li> </ul>	
Emotional distress of the staff – including anxiety and workload	Emotional distress	Staff	<ol> <li>Sharing of risk assessment- hazard identification and control measures</li> <li>Support from SLT/ Well-being team if needed</li> <li>Staff meeting – virtually – to discuss concerns and shared control measures</li> <li>Sharing of support helplines</li> <li>At least one SLT member of staff on site every day for staff to share concerns with</li> <li>Risk assessments reviewed regularly.</li> <li>Designated "staff areas" areas for different groups of staff.</li> <li>Extremely vulnerable staff (Shielding) work from home</li> <li>Sharing of support helplines for all</li> <li>If vulnerable staff are required to be in school, their individual RA will be updated prior to their return.</li> </ol>	

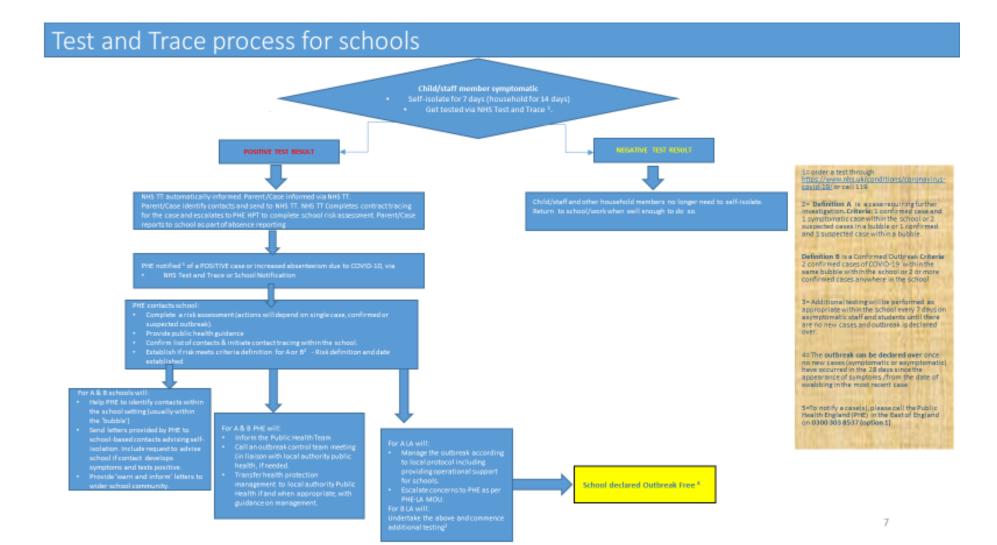
			<ol> <li>Where signs of distress are recognised – support plan put in place.</li> </ol>			
Risk of spreading virus due to close contact with children – 1:1 and restraint	resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Read (Coronavirus (Covid 19) Implementing protective measures in early years and education settings.</li> <li>Masks to be worn in the situations outlined in the guidance</li> <li>Instructions from PHE re cleaning will be followed.</li> <li>PPE available and to be used</li> <li>Visor available if needed</li> <li>Reduced timetable / exclusion / inclusion considered if necessary if children are acting in a way staff are put at risk</li> </ol>	Individual risk assessments will need to be read in conjunction with this RA for children with specific 1:1 needs.		
Staff movement around the school	resulting in indirect transmission of the virus	Staff	<ol> <li>Staff will wash their hands when they arrive at school and when they leave</li> <li>Keypads on doors will be wiped by the person who touched them</li> <li>Gate keypads wiped by the person opening the gate.</li> <li>Offices to be closed, or only accessed by essential staff</li> <li>Only office staff to enter the office beyond the marked out box.</li> <li>Maintain 2m distance in staff room.</li> <li>Appropriate cleaning materials and wipes to be available in all shared areas.</li> <li>Where possible, surfaces which need to be touched should be limited – lids removed from tea/coffee containers for example</li> <li>Stay in zoned teaching area in class</li> <li>Shared spaces (photocopier rooms, stock cupboards) to have space specific risk assessments shared with staff.</li> <li>Staff will be on site only when necessary and will be encouraged to go home promptly (to avoid additional contact with adults)</li> <li>Staff must wash their hands before entering a shared area and when leaving</li> </ol>	Appropriate signage to be made and erected		

			<ul> <li>13. Staff to sign in on entry and sign out as they leave – daily staff signing in sheet on cupboard door by the entrance. Staff to use their own pen.</li> <li>14. Space specific risk assessments will be read in conjunction with this risk assessment.</li> </ul>			
Children/ Staff falling ill and showing symptoms in School	resulting in direct transmission of the virus	Children Staff Families Wider Community	<ol> <li>Members of the senior leadership team and the CEO of CAT will continually check for further updates and amend risk assessments accordingly and in line with new guidance.</li> <li>If any child displays symptoms, parents will be immediately contacted to take their child home.</li> <li>Any child waiting to be collected will be in a room with windows and doors that are opened.</li> <li>If they use the toilets, these will be thoroughly cleaned with disinfectant before anyone else uses the area.</li> <li>The person who supervised the child, will do the cleaning to avoid unnecessary exposure.</li> <li>A staff member will remain behind a closed door if this is at all possible. Where this is not possible, staff will wear PPE required and will stay as far away as possible.</li> <li>If anyone displays symptoms, parents will be immediately contacted to take their child home.</li> <li>Following a positive test school would follow the isolation advice from DfE/PHE.Testing of staff who have had contact with that group will be a priority. Advice to parents of group to also have their child tested if they show symptoms.</li> </ol>			
All stakeholders identified as being at increased risk and exposed to COVID-19	All stakeholders identified as at increased risk and exposed to COVID-19.	Employees, pupils, contractors and visitors including those in specific vulnerable groups such as BME,	<ul> <li>1.Children and young people (0 – 18 years of age) who have been classed as clinically extremely vulnerable due to pre-existing medical conditions are advised to shield.</li> <li>2.Clinically extremely vulnerable children are</li> </ul>	Government guidance for young people on shielding and protecting people most likely to become unwell if they catch coronavirus is available via: <u>https://www.gov.uk/government/</u>		

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		may be expected to	not expected to be attending school and	publications/quidance on	
		may be exposed to	not expected to be attending school and	publications/guidance-on-	
		COVID-19.	should continue to be supported at home as	shielding-and-protecting-	
			much as possible.	extremely-vulnerable-persons-	
			3.If a child is deemed clinically vulnerable (but	from-covid-19/guidance-on-	
			not clinically extremely vulnerable), parents	shielding-and-protecting-	
			MUST follow medical advice provided for their	extremely-vulnerable-persons-	
			child.	from-covid-19	
			4. Identify pupils who are clinically extremely	NHS guidelines outline the criteria	
			vulnerable and clinically vulnerable.	for those at higher risk of	
			5.SLT to communicate appropriately with	COVID19, this can be accessed via:	
			their most vulnerable children and health care	hhttps://www.gosh.nhs.uk/news/c	
			plans updated where necessary.	oronavirus-covid-19-information-	
			6.Additional arrangements implemented to	hub/coronavirus-covid-19-and-	
			support medical needs of pupils who will be	vulnerable-	
			attending schools and documented within	If the need for PPE/RPE is	
			health care plans.	required, then staff must be	
			7.Health care plans and arrangements for	trained in the safe putting on and	
			supporting medical needs of pupils to be	removal of items. Government	
			communicated to relevant persons only.	guidance issued for COVID-19	
			8.Updated health care plans to be signed by	Personal Protective Equipment is	
			parent / carer.	available at:	
			9.Individual risk assessments to be completed	https://www.gov.uk/government/	
			for those in specific vulnerable groups if	collections/coronaviruscovid-19-	
			deemed necessary.	personal-protective-equipment	
			10.Assess the need for PPE / RPE to facilitate	ppe	
			any close contact personal care, or	HSE guidance related to COVID19	
			procedures that create airborne risk (e.g.	and face-fit testing is available at:	
			suctioning and physiotherapy).	https://www.hse.gov.uk/news/fac	
			suctioning and physiotherapy).	e-mask-ppe-rpecoronavirus.htm	
	Virus	Children	1. Visitors (e.g. Contractors, Supply Staff,		
Visitors to school	transmission	Staff	Delivery staff), will not be allowed on site		
	from a visitor	Families	unless there is a prior appointment or		
	coming into	Wider Community	exceptional circumstances.		
	school.		2. All visitors given RA of expectations to		
			adhere to.	Visitors asked to provide their own	
			3. Where paper signing in is used, visitor to	risk assessment.	
			use own pen.		
			4. Other professionals should supply the		
			school with their organisations' risk		
			assessment.		
			5. When visitors call to make an appointment,		
			the office staff will inform them of the		

procedures, take their contact details (for track and trace) and expectations of their visit. 6. Any visitor not adhering to the expectations	
will be asked to leave.	



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