



**Eastington Primary School Risk Assessment 2021-22
Version 12 26.2.2022**

Location / Site	
EASTINGTON PRIMARY SCHOOL	
Activity / Procedure	
OPENING OF SCHOOL FOR ALL CHILDREN	
Assessment date	
1.9.2021 – to be updated regularly in light of practical issues raised/further guidance issued/changes in the local or national covid situation	

Identify people at risk	YES or NO
Employees	YES – especially in clinically vulnerable/extremely vulnerable groups
Children	YES– especially in clinically vulnerable/extremely vulnerable groups
Visitors	YES– especially in clinically vulnerable/extremely vulnerable groups
Contractors	YES – especially in clinically vulnerable/extremely vulnerable groups

We are delighted that all our pupils will be returning to school – knowing school is a great place for children to learn, have fun and socialise. We do recognise returning a child to school will understandably lead to worries for some parents. We share this risk assessment with parents/carers so they understand the measures we will make in our school to support the reduction of risk of covid-19.

As school employers we are required to assess the risks associated with COVID-19 and implement preventative measures outlined in Government guidance.

As a school we know that risk can be reduced but not eliminated – this is acknowledged in the guidance. We will work hard to reduce the risk of direct and indirect transmission of Covid-19 through the measures set out in this risk assessment while offering a broad and ambitious curriculum. We are not experts in virology, Covid-19 or risk assessment and so will follow Government guidance as much as possible.

We recognise some children/staff/visitors have underlying conditions/family members with underlying conditions/have different views on risk around covid. Personal RAs will be written with staff/children at greater risk and additional measure put in place in line with guidance when needed.

Working with all children, while implementing measures in the risk assessment, is not the typical way of working for staff (and children). However, all staff have been involved in creating the RA and will continue to be asked for their input as we review our measures. Everyone in the staff team is committed to educating children while reducing risk as much as possible while offering a broad curriculum and school experience. Many thanks to staff for their continued positive engagement in the RA process to support children and each other.

This risk assessment is dynamic and will be monitored, reviewed and amended, when needed, in light of practical issues raised, changes in the local/national situation or new guidance given. The most up to date version of the RA will be found on the school website.

Documents used:

- Schools COVID-19 operational guidance - Updated August 2021, December 2021, January 2022, February 2022

‘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.

We have worked closely with the Department of Health and Social Care (DHSC) and Public Health England (PHE) to revise this guidance.’

‘We use the terms ‘must’ and ‘should’ throughout the guidance. We use the term ‘must’ when the person in question is legally required to do something and ‘should’ when the advice set out should be followed unless there is a good reason not to.’

- Guidance NHS Test & Trace in the workplace 13.8.2021
- Contingency Framework: education & child care settings August 2021, 3.12.2021
- DfE update e-mail update for Omicron variant 28.11.2021

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
A: Transmission of covid-19 through poor hygiene & poor respiratory hygiene resulting in direct and indirect transmission of the virus	
<u>Control measures</u>	
<ol style="list-style-type: none"> 1. Children will review handwashing routine on return to school in Sept: they will wash hands/use sanitiser when they arrive at school/before they leave; before/after eating, after breaks, when changing rooms, after they cough/sneeze/toilet and any other time needed. 2. Children will review: catch it-bin it-kill it on return to school in September. They will also be taught to cough/sneeze using their arm if they cannot get to a tissue in time. Praise will be given for adherence. Children will be reminded if they forget. 3. Three children will be allowed to use the main toilets at one time. Children will be taught to wait outside the toilet room if 3 people are using it. 4. Child friendly signs displayed in all toilet areas regarding washing hands. 5. Ensure we have a good stock of products: disinfectant, hand towels, soap, sanitiser etc.. 6. In the event of an outbreak/when working in bubbles/semi-bubbles we will keep class groups separate as much as possible - C1/C5 will use their classroom toilets and C2, C3 & C4 will use the main block as much as possible. 	

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
B: Risk of infection due to touching shared items resulting in indirect transmission of the virus	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ol style="list-style-type: none"> 1. When working in bubbles/semi-bubbles, reduce items shared between home and school as much as possible: eg use e-mail service as much as possible etc.. 2. Reading books will be shared with home. 3. When working in bubbles, semi bubbles, recorders will not be played with children from different classes. If recorder instruments are being played, instruments will not be shared. Children will have their own instrument. 4. Classroom tables, door handles etc will be cleaned by staff over lunch time. Diluted disinfectant/paper rolls/wipes are available in class. Diluted disinfectant is stored high/in a teacher cupboard so it is out of reach of children. Diluted steriliser is also available if wanted by staff too. 5. Toilets which are shared by children in different classes will be cleaned at lunch time by midday staff. 6. The end of day cleaner will wear a new top to school / a new apron for cleaning to prevent cross contamination from previous settings to school and vice versa. Hands will be washed /sanitised on entry to our site. Gloves are available if wanted. 7. All rooms used to be cleaned daily with disinfectant including: tables, door handles, light switches, taps, toilets, floors etc 	

8. Disposable paper roll will be used for cleaning wherever possible. A new cloth will be used for each classroom/toilet sink if needed. Cloths will be boil washed before reuse.
9. The cleaner will line tissue bins ready for use through-out the day. Spare bags will be left at the base of the bin too.
10. If we have a suspected case of covid-19 on site, the cleaner will be informed. The bin waste for that class will be double bagged and kept for 72 hrs in the cleaning cupboard before being placed in the outside bin.
11. After a confirmed case of Covid on site, the latest cleaning guidance will be used.
12. In the event of an outbreak, an addition clean will be considered.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
C: Lack of social distancing in enclosed/crowded places resulting in direct transmission of the virus	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ol style="list-style-type: none"> 1. CO2 monitors will be used in classrooms so T/TAs can identify when classes need air to be refreshed through purging. 2. With an awareness of cumulative aerosol transmission, one window or door of a classroom/hall/group room/office etc will be opened to support ventilation as a minimum. More external doors can be opened too to support ventilation too if wanted/needed. Internal doors can be opened to help create through air. Opening door/s at break/lunch to purge air can be undertaken by staff to reduce risk further. Children and staff will need to dress warm as the weather moves to winter. In very cold weather doors will need to be shut to keep children warm enough to work/concentrate – windows will be kept open/ajar in this circumstance. 3. Socially distancing from children is not in the guidance and is difficult to do practically. However, during an outbreak in school, staff can work while socially distancing from children as much as possible if wanted – reducing time in face-to-face contact within 1 m proximity in particular – for example, guided reading groups can be undertaken with children all facing the same way rather than in a circle; feedback from staff can be given using a large whiteboard, visualizer, interactive whiteboard etc if staff wish to work in this way. Face coverings are not recommended to be worn but can be worn by staff if wanted. 4. During a school outbreak of covid/when working in bubbles/semi-bubbles, face coverings will be carried/worn by staff in communal, crowded spaces where mixing with others outside their classroom is likely. 5. Wearing face coverings is not recommended in guidance in normal circumstances. However, due to the higher numbers of children in the hall at lunch, supervisors are encouraged to wear face coverings. The hall will be ventilated. During a school break out of covid/when working in bubbles staff in the hall will wear a face covering. 6. When working in bubbles/semi-bubbles, mixing children from different classes inside will be reduced as much as possible. For Y1 phonics, children from C1 and C2 will work in the hall, sit separately in their class groups, the hall will be ventilated. 	

7. Children will sit in their class groups in the hall at lunch. The hall will be well ventilated.
8. Children will be able to play together at break/lunch if outside as transmission of covid-19 is lower in these circumstances. However, when working in bubbles, classes will be prevented from mixing outside - break/lunch will be staggered /different arrangements for the start+end of the day will be put in place.
9. When working in bubbles/semi-bubbles, singing will take place within a class groups only.
10. During mixed class assemblies, staff at high risk can sit at the back of the hall if wanted. The hall will be ventilated.
11. When working in bubbles/when directed by DfE or Health Protection Team, assemblies will be held by TEAMS. At these times, assemblies with children from different classes will only take place outside.
12. Staff will avoid being in close contact with other staff outside of their teaching team as much as possible to reduce the risk of multiple staff members being off school at the same time. Staff will still need to work together at times to maintain the safe working of the school/support children and colleagues – this will be done while distancing as much as possible. If the school has an outbreak of covid/when directed by our local Health Protection Team/DfE, face coverings will be worn during meetings.
13. SM will be held. Staff will distance from staff in other class teams as much as practical. When working in bubbles, SM will be held remotely.
14. Clubs will run but be reviewed-dependent on the local rate/guidance in the event of a school break out etc.. Clubs can be cancelled if felt this measure is needed to reduce risk of covid spreading.
15. Guidance states face coverings do not need to be worn by children under 12. If children wear masks on the way to school they will need to be stored away from others safely for the school day. Ideally, masks will be given to parents at the school gate or if not put into a named plastic bag and put into the child's bag for use again at the end of the day. Hands will be washed/sanitised after mask use on arrival to school.
16. Parents/visitors have be asked to wear face coverings in crowded and enclosed areas unless exempt.
17. **If meetings take place with a small number of people** face coverings will be worn if places are enclosed/ventilation is poor. If ventilation is good, the wearing of face coverings can be discussed/agreed by meeting participants. Anyone who wishes to can wear a face covering. We recognise people may have underlying conditions/family members with underlying conditions/have different views on risk.
18. **For any large gatherings/meetings** reducing risk and working inside guidance on gatherings will be considered. Measures considered/actioned could include: numbers restricted, face covering wearing expectations shared with parents before meetings/gatherings, staggered start times for groups of parents could be planned, pinch points will be considered for entry/exit, the hall will be used wherever possible as it is the largest space, the space used will be set up to support parents social distancing, event cancelled.
19. If rooms have poor ventilation, numbers of people will be limited in them - these limits will be on the doors of the room. When working in bubbles, room restrictions will be adhered to strictly.
20. Parents have been asked to wear face coverings in reception area as the area is enclosed/poorly ventilated.
21. Office staff will limit the numbers in the front entrance. If paperwork needs to be shared with parents this will be done while socially distancing.

22. Visitors will be admitted to the school through the side front door/outside black gate wherever possible and not through the Administrators room.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
D: Risk of spreading virus due to very close contact with a child/adult resulting in direct transmission of the virus	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ul style="list-style-type: none"> • If a child has a toilet accident, they will be encouraged to change themselves. Spare clothes can be provided by parents. If spare clothes are not provided, school spares will be used. If a child is not able to change themselves, we will discuss with parents/carers and parents may be called to collect their child. If your child is likely to have a toilet accident, then please do contact us so we can put measures in place. • Guidance has stated that PPE is not needed for first aid so staff are to wear usual PPE for the first aid task. When undertaking general first aid staff will not be able to maintain social distancing and so staff can wear face coverings if wanted – this will be encouraged if school has an outbreak of covid cases. Gloves, aprons, masks, goggles, visors are available to all staff members for the administration of first aid. It should be noted that visors do not offer protection from fine aerosol but do protect the face from larger droplets. They are available for staff for general use if wanted. They will be named and looked after by the staff member. They will be stored away from children/where children work when not in use. Visors are not a replacement for socially distancing or mask wearing if people are at increased risk from covid. • If children need medicine at school (antibiotics), parents will be asked to come to school to administer it at the appropriate time in the front entrance or this will be discussed with parents. • If CPR is required on an adult, attempt compression only CPR and early defibrillation until the ambulance arrives. (This is current first aid advice regardless of covid-19.) • If CPR is required on a child, use a resuscitation face shield (available in 1st aid kit in classes/library). 	

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards	
E: Emotional distress of the children		
LOW	NEGLIGIBLE	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls	
1. There will inevitably be disappointment when we need to put additional measures in place to reduce risk which impact on classes mixing. Children will have same staff/peers working with them daily so staff can support their emotional needs.		

2. Children working in class groups will get to know each other quickly in September, if they don't know each other already. Staff will help with this if we have a new pupil and new pupils will be buddied up with a classmate.
3. The school has had a strong focus on the 5 ways of well-being since the pandemic started through PSHE and well-being focused sport/outdoor learning afternoons in 2020-21. Young sports & wellbeing leaders will be trained by the sports coach/external coaches (Andy Lewis) this year and they will support children during lunch as their role develops/they are trained.
4. Staff have had training in mindfulness to enable them to use techniques to support children.
5. Staff have up to date information on local organisations that will support children who need additional help with developing positive wellbeing. They can seek support from the SENCo/DSL for support with specific pupils/agencies too. Referrals to other agencies will continue to be made to seek additional support when needed.
6. A full and ambitious curriculum will be taught so children will enjoy all subjects.
7. Clubs after school and during lunch will operate as soon as possible as this supports well-being and enjoyment.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
F: Emotional distress of the staff	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ol style="list-style-type: none"> 1. Staff are included in the risk assessment process – input into hazard identification and control measures through INSET meetings and discussion. 2. 1:1 RA undertaken with staff who are at increased risk from covid in line with guidance requirements (those who are CEV/pregnant). These will be reviewed when significant changes to guidance are issued. 3. Staff meeting time will be given to review control measures as we return to school/implement significant changes to the RA measures. Staff have been asked to share concerns/ways of working better with SLT/HT, so we can explore options/further measures needed. 4. The risk assessment is dynamic and will be updated/amended as needed/in light of new guidance. 5. HT has made it clear that staff need look after themselves as well as the children. If overwhelmed by work staff can talk with the HT - we recognise the additional worry over Covid-19 affects every person. The school purchases OH support and has been offered to staff members. OH well-being program has been offered to all TA/teaching/admin staff too. 6. Opportunities for the staff team to work/socialise together will be facilitated to ensure the strong team we have continues to be a strength of our school – within guidance. 	

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
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G: Risk of spreading virus due to close contact with a child/adult who might be covid positive resulting in direct transmission of the virus

Control measures

List your control measures required to reduce risk – add appropriate detail about the type and location of controls

- Members of the school community should not attend school if they have one of the recognised covid symptoms.
- A system is in place for any child/adult developing COVID 19 symptoms on the school site to be taken to a safe space away from others (**music room in am/SR in pm/outside bench by black gate dependant on weather**) while parents/carers are called to collect the child.
- When a staff member is caring for a child/adult with symptoms of covid-19: A face mask (Type IIR) should be worn if a distance of 2 metres cannot be maintained (all classrooms have a store of these, as does the isolation room and main supplies are in the library cupboard too.) If in doubt, wear a mask. If contact with fluids might be necessary, then gloves, an apron and a face mask should be worn too. Eye protection (goggles/face visor) should be worn if there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting. If in doubt, wear a visor.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
H: Risk of illness for vulnerable children, staff and family members through direct and indirect transmission of the virus	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ol style="list-style-type: none"> 1. Pupil attendance is mandatory and the usual rules on attendance apply. Any parent concerned about their child attending school should discuss this with the HT – we understand some parents may have concerns. 2. A small number of pupils will still be unable to attend in line specific guidance given to them by healthcare professionals. Please talk with the school if this is the case. Guidance will be followed for pupils who are in this situation. HT/SLT are happy to discuss any concerns with parents. 3. Guidance states staff who were previously in the clinically vulnerable/extremely clinically vulnerable groups should return to work unless given specific medical advice. Those who live with people who are clinically extremely vulnerable can also return to work. 4. RA will be undertaken and measures put in place/agreed for staff with an increased risk from covid-19 due to pregnancy/other reasons in line with guidance. These RA will be updated as guidance changes. If staff have any concerns regarding their risk, they should discuss them with the HT. We aim to support all staff working in school. 5. Advice will continue to be sought when needed from LA HR & OH when needed to support staff with clinical vulnerability. 	

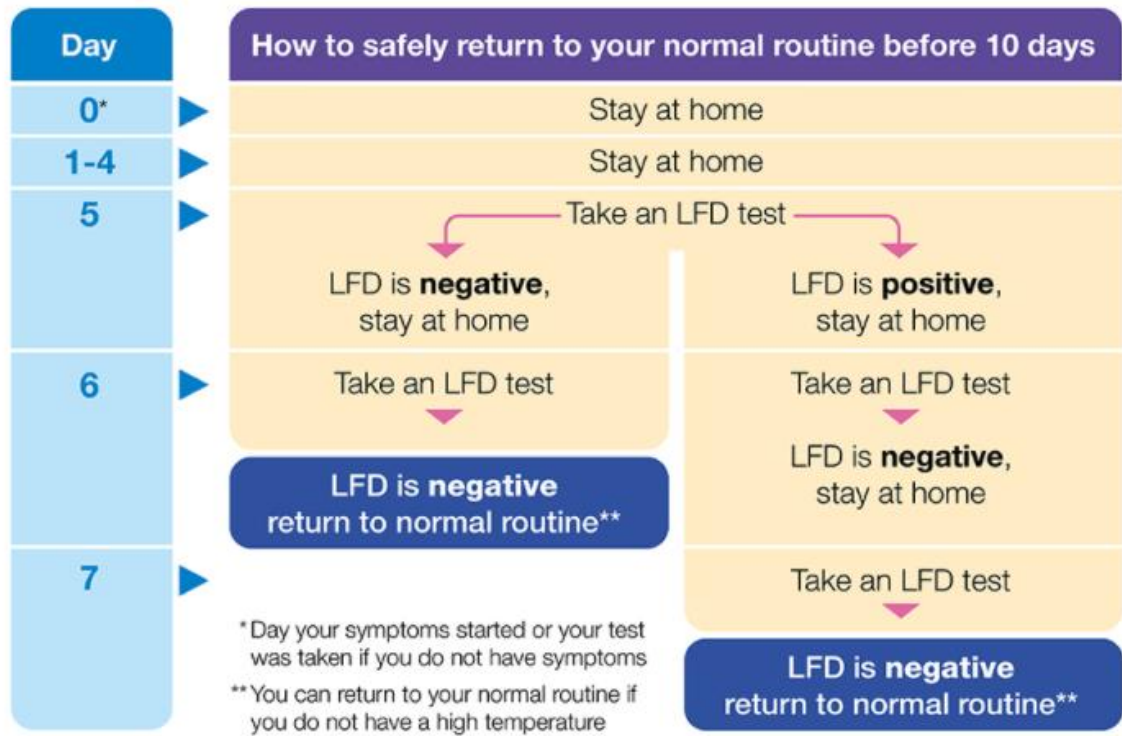
<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
I: Guidance is not understood/acted upon in relation to self-isolation, testing etc – increasing the risk of direct/indirect transmission of the virus.	

<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<ul style="list-style-type: none"> • At present NHS states covid symptoms as: a new, continuous cough – this means coughing a lot, for more than an hour, or 3 or more coughing episodes in 24 hours: a loss or change to sense of smell or taste – this means they cannot smell or taste 	

anything, or things smell or taste different to normal. See the link for symptoms in children/adults: <https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/>)

- Pupils, staff, parents and other adults should not come into school if they have symptoms, have had a positive test result.
- If a child shows symptoms of Covid-19 at school (temperature, new cough etc.), we will need to ask parents to collect them and have a PCR test in the interests of infection control, even if the child does not feel unwell. This means that even if a parent/carer thinks they are struggling with another medical need such as hay fever/asthma/cough they will be sent home – this is because, in this instance, it will not be suitable for staff members or other children to be exposed to a child who is constantly coughing etc – PCR tests are needed to rule out covid.
- Current advice from 26.2.2022:
- If you have one of the main covid-19 symptoms (a new continuous cough; a high temperature; a loss of, or change in, your normal sense of taste or smell (anosmia), you should order a PCR test. You are advised to stay at home and avoid contact with other people while you are waiting for the test result.
- If you have covid-19 (a positive test on LFD/PCR) you can infect other people from 2 days before your symptoms start, and for up to 10 days after. You can pass on the infection to others, even if you have mild symptoms or no symptoms at all. If you have covid-19 you should stay at home and avoid contact with other people.
- Many people will no longer be infectious to others after 5 days. You may choose to take an LFD test from 5 days after your symptoms started (or the day your test was taken if you did not have symptoms) followed by another LFD test the next day. If both these test results are negative, and you do not have a high temperature, the risk that you are still infectious is much lower and you can safely return to your normal routine.
- Children and young people with covid-19 should not attend their education setting while they are infectious. They should take an LFD test from 5 days after their symptoms started (or the day their test was taken if they did not have symptoms) followed by another one the next day. If both these test results are negative, they should return to their educational setting if they normally attend one, as long as they feel well enough to do so and do not have a temperature.

How to safely return to your normal routine before 10 days



If your day 5 LFD test result is positive, you can continue taking LFD tests until you receive 2 consecutive negative test results.

- School will contact School Education Helpline: Telephone: 0800 046 8687 Monday to Friday, 8am to 6pm / our LA support officer for advice when needed. School will contact our local [health protection team if needed](#), when advised to by the Education Helpline. Our actions will be guided by the health protection team's advice.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
J: Lateral Flow testing of staff twice a week is not taken up/used to support reducing risk - leading to covid-19 being transmitted directly/indirectly.	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

From 24.2.2022, guidance states staff do not need to undertake twice weekly LFD tests. LFD test will be shared with staff if/when the school has an outbreak or guidance is altered.

When guidance states school staff should undertake twice weekly LFD testing the measures below will be in place:

The purpose of using this lateral flow device test is to catch asymptomatic staff and so reduce/break the transmission of covid-19 to others.

Staff engagement in testing is a choice. Staff can opt in/out.

Testing is open to staff working on site regularly.

ZA/LB will share the roles of COVID Coordinator and Registration Assistant. ZA/LB will implement the roll out of testing and share information provided with staff. ZA/LB will keep a log of kits issued and positive test results as requested.

- If staff have symptoms of covid they should book a PCR test in the usual way asap.
- LF test kits will be stored in the upstairs staff room (between 2-30C). Staff will not take kits unless issued.
- Staff will sign to agree to testing/say they have the correct instructions/consent to the privacy notice which has been shared with them. This will be explained at the first time test kits are given by ZA/LB and in SM (1.2.2021)
- Information on LFD testing has been shared with staff at Staff Meetings, in an e-mail summary and original docs. This has covered the purpose of testing (to reduce transmission through catching asymptomatic cases), what to do before a test, how to test, how to share results with NHS Test and Trace, how to inform the school, the reliability of the test etc.. Staff have been signposted to the Primary Testing platform so they can read all documents if wanted. Staff have been signposted to a recommended YouTube clip on how to administer the test by Dr Amir Khan.
- Staff must keep the tests away from direct sunlight & not store them in the car/fridge. The test needs to be undertaken at 15C+ so staff need to bring the test to this temperature before use. Staff are not to eat/drink 30 mins before using the test (water is allowed)
- Staff will be able to ask any questions they have when they collect kits, at staff meeting or when they are onsite. ZA/LB are not experts but will work hard to answer/find the answer to any question asked.
- Staff to request new boxes of kits from LB when they have 2 kits left in their box.
- Staff onsite everyday/nearly everyday should test on Sund & Wed evening. Staff working on site less regularly may have a different timetable – this will be agreed when test kits are issued. Positive test results and result card identification code need to be sent to LB via text or e-mail (as agreed with the staff member when test kits are issued) before 7pm to allow ZA/LB to amend the operation of the school/contact parents. Staff to contact NHS (website/number in instruction booklet). All test results need to be reported to NHS (whether positive, negative or void).
- Staff and SLT know the actions to be followed after testing:
 - A negative result means the staff member continues to work & follow the measures outlined in the RA.
 - A void result means the staff member undertakes another test. Another void result means the staff member (not contacts) self isolates and seeks a PCR test. The PCR test results will dictate whether the staff member can return to work or not.
 - A positive result means the person will isolate and seek a confirmatory PCR test asap.

- Staff have been made aware that LFD tests are usually accurate when the results are positive but that negative results are 60-70% accurate. If staff results are negative they know this does not mean that they do not have covid-19 and all the measures in this RA need to be adhered to as usual.
- Parents have been informed of the start of testing with LFT and how we will respond to test results.

<u>Identify hazard</u>	Record the hazard that could cause harm or injury – add appropriate detail about the type and location of hazards
K: Case increase in school leading to greater spread of Covid-19.	
<u>Control measures</u>	List your control measures required to reduce risk – add appropriate detail about the type and location of controls
<p>Advice from DfE helpline (0800 046 8687 will be sought if there is a marked increase in covid cases, From 'Contingency Framework Guidance' Feb 2022 (https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1057141/Contingency_framework_education_and_childcare_settings_February_2022.pdf);</p> <p><i>“The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, these include:</i></p> <ul style="list-style-type: none"> • <i>a higher than previously experienced and/or rapidly increasing number of staff or student absences due to COVID-19 infection</i> • <i>evidence of severe disease due to COVID-19, for example if a pupil, student, child or staff member is admitted to hospital due to COVID-19</i> • <i>a cluster of cases where there are concerns about the health needs of vulnerable staff or students within the affected group”</i> <ol style="list-style-type: none"> 1. If advised by DfE Helpline, advice will be sought from UK Health Security Agency (UKHSA) 2. The measures put in place will reflect the advice given/the outbreak. This could include limiting trips/open days/live performance/parents within the setting, a one off additional clean, additional ventilation if possible, consideration of stopping mass gatherings of children in assembly, reducing mixing of classes, introduction of face masks for staff in areas where mixing with others is more likely etc (From Contingency Framework: education & child care settings August 2021) 3. To minimise disruption, school staff will be asked to social distance from staff in other classes/areas, such as admin, as much as possible so they are not in 'close contact'. This is to enable the school to remain operational. 	

Assessor's comments	Insert comments relevant to findings as appropriate
<p>We recognise some children/staff/visitors have underlying conditions/family members with underlying conditions/have different views on risk around covid-19. Personal RAs will be written with staff/children at greater risk in line with guidance and additional measure put in place to support individuals.</p> <p>All members of our school community have worked together and been respectful of others.</p>	

Name of assessor	Signature of assessor	Date
Zoe Avastu	<i>Zoe Avastu</i>	1.9.2021

Risk assessment reviews	<p>All staff will continue to be asked on ways we can work as safely as possible with children on our site as they have different roles/responsibilities within the school. The RA will be reviewed weekly with staff at staff meeting after a change in guidance.</p> <p>There will always be a member of SLT on site so any concerns around H&S/the measures can be shared swiftly.</p> <p>The RA has been shared with parents on many occasions and the most recent copy is on the school website.</p>
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Governor comments	Insert comments relevant to assessment as appropriate

Name of Governor	Signature of Governor	Date

