 <p><b>NORTH LINCOLNSHIRE COUNCIL</b> www.northlincs.gov.uk</p>	Business Performance System (BPS)		Document Ref. No.	BPS 4.3.1.F1	
	<h1>General Risk Assessment Form</h1>			Author	M. Smith
				Version	01
				Issue Date	26.04.17
				Review Date	26.04.20

### Section 1: Assessment Details

<b>Assessment No.</b>		<b>Directorate / Service:</b>	Children's Services	<b>Location:</b>	St Luke's School
<b>Assessment Date:</b>	5 <sup>th</sup> March 2021	<b>Review Date:</b>	When changes occur	<b>Assessor/s Name:</b>	Alastair Sutherland
<b>Activity to be Assessed:</b>	Covid-19 – Full Reopening of Schools				
<b>Persons at Risk:</b> (Delete as appropriate)	<b>Adults</b>	<b>Children</b>			

### Section 2: Key / Guidance

<b>L</b>	<b>Likelihood</b> (1 to 5) - See Section 6, Risk Factor Scoring Matrix.	<b>ER</b>	<b>Existing Risk</b> - Evaluation of the risk with existing control measure in place.
<b>S</b>	<b>Severity</b> (1 to 5) - See Section 6, Risk Factor Scoring Matrix.	<b>RR</b>	<b>Residual Risk</b> - Evaluation of risk following implementation of additional actions required due to unacceptable level of existing risk.

### Section 3: Risk Assessment

Identify the Hazards:	How Could Harm Result from the Hazard:	Current Control Measures:	Existing Risk: (L x S = ER)			Additional Control Measures Required:	Residual Risk: (L x S = RR)		
			L	S	ER		L	S	RR

<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating factor 1: Minimise contact with those that are unwell</b></p>	<p>If an adult or child in school has the virus (symptomatic or asymptomatic) then this could be passed on to other people.</p> <p>As we have clinically vulnerable and clinically extremely vulnerable adults and children in school it is essential that we take the highest possible measures to minimise having people with symptoms in school.</p>	<ol style="list-style-type: none"> <li>1. If a member of staff or a child is ill with the symptoms of Coronavirus then they should not attend school (see attached guidance – symptoms of Covid - 19)</li> <li>2. If a member of staff or a child becomes ill during the day then they should be isolated in the EHCP room and parents or a member of their household should come and collect them immediately. The member of staff supporting a child should wear full PPE (as described in the attached document – symptoms of Covid -19)</li> <li>3. All children and adults to have their temperature checked twice a day, using a non-contact, infra-red thermometer. Each Key Stage to have their own thermometer</li> <li>4. All staff members, children and their families must follow the present government guidance when not at school. When changes are made to the guidance staff members and parents will be informed where they can access the latest guidance.</li> <li>5. Parents will be told to follow all the guidance and this will be communicated to them through email and letters</li> <li>6. Anyone who becomes ill with the symptoms of Covid-19 must engage with the NHS Track and Trace system</li> <li>7. If a person becomes ill with the symptoms of Covid-19 and subsequently tests positive, then the local public health department will be contacted</li> </ol>	1	5	5				
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating factor 2: Good hand hygiene and other hygiene methods</b></p>	<p>Catching the virus could have a significant impact on the health of children. We still have a number of children attending school that have underlying health conditions which places them into either the clinically vulnerable or clinically extremely vulnerable categories.</p> <p>Present evidence shows that Coronavirus is highly contagious and spreads quickly and easily and that asymptomatic children can spread the virus.</p> <p>All staff and pupils are at risk from catching the virus.</p>	<p>Adults must use hand sanitizer before they enter school.</p> <p>Adults to wash their own hands regularly. (Following latest hand hygiene guidance – attached to this risk assessment).</p> <p>Children’s hand’s to be washed regularly (Following latest hand hygiene guidance – attached to this risk assessment).</p> <p>Remind children and adults not to touch their faces. Tell children not to put objects in their mouths, support children to learn this skill</p> <p>Alcohol gel (hand sanitizer) has been placed in all classes, on the EFYS and Key Stage 1 playgrounds, in the dining hall and PE hall. All children must be supervised by an adult when in classrooms, on the playgrounds and in the dining hall and PE hall to make sure they cannot access the hand sanitizer</p> <p>All adults have a clip on hand sanitizer to use when they cannot wash their hands. They should use this between working with different children. Adults to ensure no children can access the clip on hand sanitizer and to check for any faults.</p> <p>Adults must also report any incidents of children accessing hand sanitizer, either through the near miss form or the first aid form.</p> <p>All sink areas should have the latest handwashing advice displayed (see attached poster)</p> <p>Staff should teach children handwashing skills, through songs and developing routines</p>	2	5	5	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	2	4	8
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating factor 3: Ensuring good respiratory hygiene</b></p>	<p>Many of the children at school do not follow good respiratory hygiene approaches. As coronavirus is an airborne virus then it puts other children and adults at risk. The measures shown should be followed at all times to minimise the risk</p>	<p>Follow the “Catch-it, it bin it, kill it” approach</p> <p>Ensure tissues are available at all times in all classrooms.</p> <p>Tissues should be placed in the bin in the classroom or if there is a risk that the children will access the bins then they should be placed in the bin in the store cupboards.</p> <p>All classes and rooms should display the catch it, bin it kill it poster.</p> <p>Children should be taught to follow good respiratory hygiene measure.</p> <p>Adults and children should wash hands (or use hand sanitizer if a sink is not available) immediately after coughing and sneezing</p> <p>If children do not follow the above measures (or other identified measures) then a member of the senior leadership team should be informed and an individual risk assessment should be completed to highlight any additional control measures.</p> <p>Classrooms and other areas should be kept well ventilated at all times. Windows should be kept open and if safe to do so then doors should be wedged open. Staff should dress appropriately for the weather conditions.</p>	2	5	10	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	2	4	8
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 4: Enhanced cleaning of the school environment</b></p>	<p>A common concern of coronavirus is that children have been identified as carriers but are often asymptomatic.</p> <p>This creates a significant challenge in the primary special school environment, where the children do not follow the social distancing measures advised or have poor hygiene. This means that there should be a greater emphasis placed on cleaning the school environment.</p>	<p>Increased cleaning regime in all classes throughout the day. Staff to clean hard surfaces throughout the day and other regularly touched surfaces, including door handles and light switches (see attached guidance – Cleaning the school environment for further details).</p> <p>Cleaning staff to work during day to clean toilet areas and other shared areas of the school, as per the latest version of the Department for Education guidance (see also attached guidance – Cleaning the school environment for further details).</p> <p>Shared resources should be cleaned between pupil use, using standard classroom cleaning products. Cleaning products should be kept out of reach of children and any incidents should be recorded on the near miss form or first aid form. Children are leaving early to give classes time to clean resources at the end of the day.</p> <p>Outside shared areas should be cleaned between use, particularly if a different bubble is going to use the equipment. Classes have been provided with anti-bacterial wipes to do this. Wipes should be placed in a bin bag when used.</p> <p>Any shared indoor equipment (e.g. PE equipment, sensory rooms) should be cleaned during and after use (see document – activities for further guidance)</p> <p>Where possible children should have their own set of resources. Plastic tubs are available to place their own resources in.</p>	1	5	5				
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 5: Minimising contact and Social Distancing (Part 1)</b></p>	<p>Children or adults could be asymptomatic and carriers of the virus.</p> <p>This creates a significant challenge at St Luke's School as children are not following the social distancing measures put in place. Children may also find it difficult to manage or their behaviours, meaning that they may need a level of physical support, e.g. team teach physical interventions or emotional support such as a hug. If a child or adult is in school and is asymptomatic and has contact with adults this could lead to infection of adults or other children.</p> <p>The number of contacts between children and staff should be reduced.</p>	<p>All children and staff should follow the latest social distancing guidance</p> <p>Staff need to be distant from each other (2 metres), unless carrying out a personal care task or intervention/therapy that requires to adults.</p> <p>If a distance of 2 metres cannot be maintained from other adults then other mitigating factors should be in place – for example facing away from the other adult or wearing a disposable mask.</p> <p>Where possible adults should keep 2 metres away from the children. If this is not possible (due to the support that children require) then adults should put other mitigating factors into place, e.g. more regular washing of hands, facing away from the child, wearing a disposable face mask if you are concerned about your own health</p> <p>Teach children how to be socially distant from adults and each other (where reasonably practicable). Ensure classroom layout supports this (note: placing children next to each other and in rows may cause further risk as it could increase the incidences of challenging behaviour). Reduce any unnecessary furniture of equipment from classrooms to create more space. This equipment can be stored in containers.</p> <p>Ensure all parents are informed of the difficulties that we face at St Luke's in encouraging the children to be socially distant and ask parents to support the teaching of social distancing.</p>	2	5	10	<p>Children across the school are not following social distancing measures. The DfE states that as the children are showing no signs of the virus then there is minimal risk to the adults and younger children are less likely to pass on the virus</p> <p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	2	4	8
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 5: Minimising contact and Social Distancing (Part 2)</b></p>		<p>The school will be organised into bubbles as follows:</p> <p>EYFS 1 Bubble  EYFS 2 Bubble  Class 1 Bubble  Class 2 and 3 Bubble  Class 4 and 5 Bubble  Class 6 and 7 Bubble  Class 8 and 9 Bubble  Class 10 and 11 Bubble  Green and Purple Bubble</p> <p>Children will not mix across bubbles, unless they are accessing a specific therapy or work group.</p> <p>Supply staff will be identified to support specific bubbles as far as reasonably practicable.</p> <p>The creation of bubbles will allow for the reduction of the number of children in the diner hall and on the playground at any one time. A timetable has been produced to support this. The playground has been split into two to allow two bubbles on the playground at once.</p> <p>The PE hall will be used at dinner times (for Key Stage 2). Chairs and tables will be set up so that children can be distanced from each other and they will be cleaned between classes and screens will be placed between bubbles</p> <p>There will be no whole school or across bubble events. This means that assembly will take place virtually on a Friday afternoon. There will be no whole group staff meetings, but smaller meetings will take place and adults be expected to follow the social distancing rules at meetings</p>	1	5	5	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	1	4	4
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 6a: Use of PPE</b></p>	<p>Supporting children's personal care and supporting children with activities within the classroom means that children will be within two metres of adults at different points throughout the day.</p> <p>This creates the risk for the virus to be passed on to adults if procedures are not followed, if a child is showing symptoms of the virus and a risk that the virus could be passed on even if the procedures are being followed if a child is asymptomatic (though the DfE states that this is not a significant risk due to the lower viral load of asymptomatic people).</p>	<p>Protective equipment will be used as per school guidance (see attached document – use of Personal Protective Equipment (PPE))</p> <p>Due to the close contact nature of our work with children we will follow the advice as recommend in this risk assessment and the attached document (use of PPE)</p> <p><b>Children with no symptoms:</b> Staff should wear a face shield, a disposable mask, disposable gloves and a disposable apron when:</p> <p>Changing/Toileting a child. Feeding a child. Cleaning up bodily fluids When carrying out first aid</p> <p>Adults should wash their hands after the above tasks and dispose of all products according to the attached advice and Public Health England video (identified on the attached document)</p> <p><b>Children with symptoms:</b></p> <p>Parents will be asked to collect them immediately. If there is the need for personal care during this time then they should use disposable gloves, disposable aprons, fluid resistant surgical facemasks and goggles.</p> <p>Wearing PPE is not mandatory at other times, though there may be times when members of staff would like to wear PPE. This should be discussed with a member of the Senior Leadership Team to identify if wearing PPE at that time is appropriate</p>	2	5	10	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	2	4	8
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 6b: Use of PPE</b></p>	<p>There are lots of vulnerable children at school, staff should wear PPE to protect them</p> <p>There are a significant number of vulnerable adults at school and therefore PPE is required to reduce the spread of the virus and to protect vulnerable adults</p>	<p><b>When in corridors or other communal areas:</b></p> <p>All staff should wear a face mask when in corridors (either a disposable mask or their own face mask). The disposable face masks supplied by school are recommend as they offer 3 ply fluid resistant protection, which protects the wearer and people that they come into contact with. Visors/shields should not be worn to replace masks as they offer little protection to the person wearing them</p> <p><b>When collecting children to and from the bus</b></p> <p>All staff should wear a face mask when in corridors (either a disposable mask or their own face mask). The disposable face masks supplied by school are recommend as they offer 3 ply fluid resistant protection, which protects the wearer and people that they come into contact with. Visors/shields should not be worn to replace masks as they offer little protection to the person wearing them</p> <p><b>When supporting a vulnerable child:</b></p> <p>All staff should wear a face mask when in corridors (either a disposable mask or their own face mask). The disposable face masks supplied by school are recommend as they offer 3 ply fluid resistant protection, which protects the wearer and people that they come into contact with. Visors/shields should not be worn to replace masks as they offer little protection to the person wearing them</p>	2	5	10	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	2	4	8
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 7:</b></p> <p><b>Ensuring an effective response to any outbreak</b></p>	<p>If a child or adult who has been attending school tests positive for Covid-19 then there is a risk that other members of staff or children could have been in contact with that person and in turn become infected with Covid-19.</p> <p>This means that all children and adults need to engage with the control measures</p>	<ol style="list-style-type: none"> <li>1. Staff and children - must engage in the NHS Test and Trace Programme. This means that you should: <ol style="list-style-type: none"> <li>a. Book a test if you are displaying symptoms of Covid-19</li> <li>b. If you test positive, then provide details of anyone you have been in close contact with</li> <li>c. Self-isolate if you have been in close contact with any individual who develops symptoms of Covid-19 or tests positive for Covid-19</li> </ol> </li> <li>2. Any confirmed cases of Covid-19 within the school community will be managed by: <ol style="list-style-type: none"> <li>a. A senior member of staff will contact the local health protection team for advice – all their advice must be followed</li> <li>b. People who have been in close contact with an infected person will be sent home (unless advised not to do so by the health protection team) and told to self-isolate/engage in the test and trace programme</li> <li>c. A record of other contacts that classes have (from outside of their bubble) will be kept by each class, with names, dates and times. A book will be provided to each class to record this</li> </ol> </li> <li>3. Contain any outbreak (2 or more confirmed cases) by following all of the advice from the health protection team. This may include the whole school or wider bubbles self-isolating</li> </ol>	1	5	5				
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 8:</b></p> <p><b>Supporting entry and exit to school and flow of children around school</b></p>		<p>Children will still attend school on school on school transport. The entry to school and exit from school will be managed carefully to reduce the amount of children getting in to school at any one time.</p> <p>Parents will have to queue with the buses. Parents will not be allowed to bring their children to or collect them from reception (unless they are late for school due to an appointment or picking them up early). Parents should only get out of their car to help their children get in and out of the car. If parents could wear a mask when they get out of the car this would help to keep school staff safe.</p> <p>We will operate a one way system in and out of school in the morning and evening. Morning: Children will come into school via the children's entrance and staff must go out of school via the main entrance. Evening: Children will leave school via the children's entrance and come back into school via the main entrance. As all families are either transported by car or bus this allows for staggered start and finish times.</p> <p>Staggered lunchtimes, mean that there will be a reduced number of children trying to get into the halls at any one point.</p> <p>Classes should exit to their playground from their classroom doors, where possible. If you have to use the corridor please check that it is clear of other classes before moving to the playground.</p> <p>There should be no more than 1 class at the toilets at any one time. Classes should check the toilets are empty before sending children.</p>	1	5	5				
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<p><b>Children and adults catching the virus</b></p> <p><b>Mitigating Factor 9:</b></p> <p><b>Reduce the number of visitors attending school</b></p>		<p>Only agreed visitors will be allowed on site and where possible visits will take place before children arrive at school or after the children have left.</p> <p>When visitors arrive at site they will be instructed on what processes they need to follow (e.g. hand hygiene, respiratory hygiene, social distancing, what to do if they develop symptoms)</p> <p>The following visitors will be allowed on site:</p> <ul style="list-style-type: none"> <li>• Health professionals, who will provide training to staff or medical support and guidance for children and families</li> <li>• Social workers</li> <li>• Therapist - to deliver training or to provide therapy, review progress or set new targets</li> <li>• Essential trainers, e.g. first aid trainers, team teach trainers</li> <li>• Contractors (where possible before and after school)</li> <li>• School inspectors or local authority representatives who may need to support or monitor areas of provision</li> <li>• Work experience students (though a reduced number)</li> <li>• Parents (for pre-arranged meetings)</li> <li>• School governors</li> </ul> <p>The above list is not exclusive and the senior leadership team may identify further adults who will be allowed to visit school.</p> <p>Where possible any training, meetings or support for children will continue to be held virtually. Visitors will only be allowed in school if they have arranged a time prior to attending school. The only exception to this will be parents, who may have a query of an urgent nature.</p>	1	5	5				
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<p><b>Vulnerable adults catching the virus</b></p> <p><b>Mitigating Factor 10:</b></p> <p><b>Ensuring staff who are in one of the vulnerable groups are kept safe</b></p>	<p>We have a number of adults at school who are classed as either clinically vulnerable or clinically extremely vulnerable. The latest government guidance states that clinically vulnerable adults can work in school (as long as they can maintain a distance) and clinically extremely vulnerable adults should work remotely where possible or in roles in settings where it is possible to maintain social distancing. If we are unable to have enough staff members return to school we will work on reducing timetables for children e.g. 4 days instead of 5</p>	<p>Clinically extremely vulnerable adults will work at home until shielding ends. When shielding ends risk assessments will be updated to see how school can best support CEV staff members to be safe.</p> <p>A risk assessment will be completed with each clinically vulnerable adult to define what role they can undertake/workspace they can work in.</p> <p>Clinically vulnerable people:</p> <ul style="list-style-type: none"> <li>• Every member of staff who is clinically vulnerable will have a risk assessment completed to determine what role they can undertake.</li> <li>• Clinically vulnerable members of staff (including those who have other mitigating factors) will have to maintain a distance of 2m metres from children and adults. Where this cannot be achieved then they should not go closer than 1 metre to a child or adult and this should only be for a short time.</li> <li>• Clinically vulnerable staff members will not carry out the following tasks: <ul style="list-style-type: none"> <li>○ Personal care</li> <li>○ Team Teach</li> <li>○ Face to face tasks</li> <li>○ Medical procedures</li> </ul> </li> <li>• Ensure all hygiene measures above are followed to the full criteria defined above. Senior leaders will monitor the measures are being followed.</li> <li>• This list will be reviewed in line with changing government guidance</li> </ul>	1	5	5	<p>Vulnerable Staff who are at greater risk have individual risk assessments in place that identify what activities they can and cannot do in school and how they can reduce close contact with others. This reduces the severity rating</p>	1	4	4
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<p><b>Vulnerable children catching the virus</b></p> <p><b>Mitigating Factor 11:</b></p> <p><b>Ensuring children who are in one of the vulnerable groups are kept safe</b></p>	<p>We have a number of children at school who are classed as either clinically vulnerable or clinically extremely vulnerable. The latest government guidance states that it is ok for these children to return to school, unless their doctor has told them that it is still not safe for them to be at school</p>	<p>Clinically extremely vulnerable children:</p> <ul style="list-style-type: none"> <li>• Parents will be advised to speak to their medical professional to ensure it is safe for their child to return to school. If their medical professional advises against returning to school then they will be supported through remote education.</li> <li>• Any clinically extremely vulnerable children attending school will have a risk assessment completed. Due to lack of available rooms and staffing challenges it may not be possible to provide them with a Covid-19 secure space as we have done previously. Parents will be informed of this, though we will endeavour to make school as safe as possible for them</li> </ul> <p>Clinically vulnerable children:</p> <ul style="list-style-type: none"> <li>• If parents have concerns about their child returning to school we will advise them to seek guidance from their medical professional.</li> <li>• A risk assessment will be completed for each clinically vulnerable child and, where possible, protective measures will be put in place, but these may be limited to enhanced hand washing and further hygiene measures in the absence of adequate staffing available and adequate space to support the children.</li> </ul>	1	5	5				
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## Section 4: Further Actions


Detail Additional Control Measures Identified in Section 3

Action Ref:	Recommendation:	Responsible Person:	Target Date:	Close Out Date:

## Section 5: Review

Revision:	Reason for Review:	Reviewed By:	Date of Review:
001			
002			
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004			
005			

## Section 6: Risk Factor Scoring Matrix

 NORTH LINCOLNSHIRE COUNCIL www.northlincs.gov.uk	Likelihood	Almost Certain	5	5	10	15	20	25	1 to 4 = Low
		High	4	4	8	12	16	20	<b>Accept the Risk:</b> No further actions required, if current control measures are used.
		Medium	3	3	6	9	12	15	5 to 8 = Medium
		Low	2	2	4	6	8	10	<b>Review the Risk:</b> Review the assessment(s) to establish if further measures could be implemented
		Improbable	1	1	2	3	4	5	9 to 12 = High
			1	2	3	4	5	<b>Reduce the Risk:</b> Ensure additional control measures are implemented to reduce the level of risk prior to carrying out activity.	
			Minor	Low	Medium	High	Major	15 to 25 = Very High	
			Severity					<b>Unacceptable Risk:</b> Activity can not be progressed until actions taken to reduce the level of risk to an acceptable level.	
Likelihood:									
1	Improbable	Well managed and all reasonable precautions have been taken. Ideally, this should be the normal state of the workplace.							
2	Low	Generally well managed however occasional lapses could occur. This also applies to situations where people are required to behave safely in order to protect themselves but are well trained.							
3	Medium	Insufficient or sub-standard controls in place. Loss is unlikely during normal operation however, may occur in emergencies or non-routine conditions, (e.g. obstructed walkways or re-fresher training required).							
4	High	Serious failures in management controls. The effects of human behaviour or other factors could cause an accident but is unlikely without this additional factor, (e.g. ladder not secured properly, oil spilled on floor or poorly trained personnel).							
5	Almost Certain	Absence of any management control. If conditions remain unchanged there is almost a 100% certainty that an accident will happen, (e.g. broken rung on a ladder, live exposed electrical conductor or un-trained personnel).							
Severity, (Consequences):									
1	Minor	Causing minor injuries, (e.g. cuts, scratches). No lost time likely other than for first aid treatment, superficial damage to assets							
2	Low	Causing significant injuries (e.g. sprains, bruises, lacerations). Minor damage to assets, fixtures or fittings.							
3	Medium	Causing temporary disability, (e.g. fractures). Some loss or damage to assets causing minimal disruption.							
4	High	Causing permanent disability, (e.g. loss of limbs, sight or hearing). Loss or damage could cause some business disruption.							
5	Major	Causing death to one or more people. Loss or damage is such that it could cause serious business disruption, (e.g. major fire).							