

## Coronavirus (COVID-19): risk assessment for schools January 2022

**Name of School:** Oldbury Park Primary RSA Academy, Worcester

Assessment conducted by: Lee Card	Job title: Principal	Covered by this assessment: <b>pupils, staff and other relevant individuals.</b>
Date of assessment: 3 <sup>rd</sup> January 2022	Review interval: <b>in line with government updates</b>	Date of next review: <i>As required</i>

### Risk matrix

Risk rating High (H), Medium (M), Low (L)		Likelihood of occurrence		
		Probable	Possible	Remote
Likely impact	<b>Major:</b> Causes major physical injury, harm or ill-health	H	H	H
	<b>Severe:</b> Causes physical injury or illness requiring first aid	H	M	L
	<b>Minor:</b> Causes physical or emotional discomfort	M	L	L

For the purpose of this risk assessment, we have used the term ‘coronavirus’ to refer to coronavirus disease 2019 (COVID-19).  
Schools need to ensure this risk assessment reflects local arrangements within their context.

The document below headed in purple is applicable to all schools within the Trust and requires these measures to be in place. The sections highlighted in RED allows the schools to add additional information linked directly to their own schools and context.

Area for concern	Risk rating prior to action H/M/L	Control Measures	In place? Yes/No	Further actions /comments	By whom and when?	Risk rating following action H/M/L	Risk rating prior to action H/M/L
Overview	H	<p><b>Summary</b>  <a href="https://www.gov.uk/guidance/actions-for-schools-during-the-coronavirus-outbreak">Actions for schools during the coronavirus outbreak - GOV.UK (www.gov.uk)</a>  This guidance explains the actions school leaders should take to reduce the risk of transmission of coronavirus (COVID-19) in their school. This includes public health advice, endorsed by the United Kingdom Health Security Agency (UKHSA). It is for leaders and staff in:</p> <ul style="list-style-type: none"> <li>• primary schools</li> <li>• secondary schools (including sixth forms)</li> <li>• special schools, special post-16 providers and alternative provision</li> <li>• 16 to 19 academies</li> <li>• infant, junior, middle, upper schools</li> <li>• boarding schools</li> </ul> <p>We expect independent schools to follow the control measures set out in this guidance in the same way as state-funded schools, and health and safety legislation applies equally to independent schools.</p> <p>Where this guidance refers to schools, that does not include maintained nursery schools or pre-reception classes. Separate guidance is available for:</p> <ul style="list-style-type: none"> <li>• early years and childcare settings</li> <li>• further education colleges and providers</li> </ul> <p>Additional operational guidance is also available for special schools, special post-16 providers and alternative provision.</p> <p>Schools and trusts should work closely with parents and carers (future references to parents should be read as including carers),</p>	Yes	N/A	LC unless stated	L	H

	<p>staff and unions when agreeing the best approaches for their circumstances. 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.</p> <p><b>Overview</b></p> <p>The government continues to manage the risk of serious illness from the spread of the virus. The Prime Minister announced on 27 November the temporary introduction of new measures as a result of the Omicron variant and on 8 December that Plan B, set out in the autumn and winter plan 2021, was being enacted. As a result, these measures are reflected in this guidance for schools. This advice remains subject to change as the situation develops.</p> <p>COVID-19 continues to be a virus that we learn to live with and the imperative to reduce the disruption to children and young people’s education remains. 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 the United Kingdom Health Security Agency (UKHSA) to revise this guidance.</p> <p><b>Changes to the previous version</b></p> <p>Changes to the guidance since its 9 December 2021 publication include:</p> <ul style="list-style-type: none"><li>• updated advice on Tracing close contacts and isolation to reflect the changes to isolation rules in this document link <a href="https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak">Actions for schools during the coronavirus outbreak - GOV.UK (www.gov.uk)</a></li></ul> <p>Changes to the guidance since its 14 December 2021 publication include on 2/1/22 The latest announcement that secondary age</p>					
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		<p>pupils should wear face coverings in classrooms was updated in the above version.</p> <p><b>Risk assessment</b></p> <p>You must comply with health and safety law and put in place proportionate control measures. You must regularly review and update your risk assessments - treating them as 'living documents', as the circumstances in your school and the public health advice changes. This includes having active arrangements in place to monitor whether the controls are effective and working as planned. For more information on what is required of school leaders in relation to health and safety risk assessments and managing risk, see the health and safety advice for schools. <a href="https://www.gov.uk/guidance/health-and-safety-responsibilities-and-duties-for-schools">Health and safety: responsibilities and duties for schools - GOV.UK (www.gov.uk)</a></p>					
<p><b>RISK ASSESSMENT BEGINS</b></p> <p><b>1)Managing spread of infection</b></p> <p><b>Mixing and 'bubbles'</b></p>	H	<p><b>RISK ASSESSMENT BEGINS</b></p> <p><b>Mixing and 'bubbles'</b></p> <p>We no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). This means that 'bubbles' will not need to be used in schools.</p> <p>a) However, school will continue to be sensible with full cohort elements ensuring that these are not excessive and that good ventilation is enforced (e.g. whole school assemblies)</p> <p>As well as enabling flexibility in curriculum delivery, this means that assemblies can resume and you no longer need to make alternative arrangements to avoid mixing at lunch.</p> <p>b) Lunches will continue to be in sittings as current school arrangements are well designed to avoid overcrowding.</p>	Yes	N/A	LC unless stated	L	H

<p><b>Tracing close contacts and isolation</b></p>		<p>You should make sure your contingency plans (sometimes called outbreak management plans) cover the possibility that it may become necessary to reintroduce ‘bubbles’ for a temporary period, to reduce mixing between groups.</p> <p>c) <b>Outbreak Management Plan available to read here: <a href="#">Outbreak-Management-Plan-Oldbury-Park-Sept-21.pdf</a></b></p> <p>Any decision to recommend the reintroduction of ‘bubbles’ would not be taken lightly and would need to take account of the detrimental impact they can have on the delivery of education</p> <p>d) <b>Arrival times remain set up to support social distancing for families on entry into school.</b></p> <p>e) <b>Staff meetings involving whole staff will take into consideration good ventilation / adequate spacing / if the meeting can take place as effectively through Teams</b></p> <p><b>Tracing close contacts and isolation</b></p> <p>Close contacts in schools are now identified by NHS Test and Trace and education settings will no longer be expected to undertake contact tracing.</p> <p>As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent to identify close contacts.</p> <p>Contacts from a school setting will only be traced by NHS Test and Trace where the positive case or their parent specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact.</p> <p>You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. From 14 December 2021, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to take a</p>					
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		<p>LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result.</p> <p>Daily testing of close contacts applies to all contacts who are:</p> <ul style="list-style-type: none"> <li>• fully vaccinated adults – people who have had 2 doses of an approved vaccine</li> <li>• all children and young people aged 5 to 18 years and 6 months, regardless of their vaccination status • people who are not able to get vaccinated for medical reasons</li> <li>• people taking part, or have taken part, in an approved clinical trial for a COVID-19 vaccine Children under 5 years are exempt from self-isolation and do not need to take part in daily testing of close contacts. Pupils with SEND identified as close contacts should be supported by their school and their families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing. For further information please see SEND guidance.</li> </ul> <p>Further information is available in NHS Test and Trace: what to do if you are contacted and in the stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection 18-year-olds are treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact.</p> <p>Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is a substantial increase in the number of positive cases in a setting (see <a href="#">Stepping measures up and down</a> for more information) or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.</p> <p><b>Face coverings – NOTE this section is updated as of 1/1/22 where GOV.UK is not yet updated.</b></p>					
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<p><b>Face coverings</b></p>		<p>Face coverings help protect the wearer and others against the spread of infection because they cover the nose and mouth, which are the main confirmed sources of transmission of COVID-19.</p> <p>Where pupils in year 7 (which would be children who were aged 11 on 31 August 2021) and above are educated face coverings should be worn by pupils, staff and adult visitors when moving around the premises, outside of classrooms, such as in corridors and communal areas. These pupils and visitors should now also wear face coverings in classrooms. This is a temporary measure.</p> <p>Pupils in these schools must also wear a face covering when travelling on public transport and should wear it on dedicated transport to and from school.</p> <p>In primary schools, we recommend that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas. Health advice continues to be that children in primary schools should not be asked to wear face coverings.</p> <p>See Circumstances where people are not able to wear face coverings for exceptions to this.</p> <p>Face coverings do not need to be worn when outdoors.</p> <p>Schools, as employers, have a duty to comply with the Equality Act 2010 which includes making reasonable adjustments for disabled staff. They also have a duty to make reasonable adjustments for disabled pupils, to support them to access education successfully. No pupil should be denied education on the grounds that they are not wearing a face covering.</p> <p><b>Transparent face coverings</b></p> <p>Transparent face coverings can be worn to assist communication with someone who relies on:</p> <ul style="list-style-type: none"> <li>• lip reading</li> <li>• clear sound</li> </ul>					
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		<ul style="list-style-type: none"> <li>• facial expression.</li> </ul> <p>Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. The benefits of transparent face coverings should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth.</p> <p>Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles. Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering.</p> <p>They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately.</p> <p>f) A constant supply of face coverings are made available to staff and visitors at the front of school. School currently request that all adults wear masks in communal areas and that visitors from outside wear masks unless medically exempt..</p> <p>Circumstances where people are not able to wear face coverings There are some circumstances where people may not be able to wear a face covering. Please be mindful and respectful of such circumstances. Some people are less able to wear face coverings, and the reasons for this may not be visible to others.</p> <p>In relation to education settings, this includes (but is not limited to):</p> <ul style="list-style-type: none"> <li>• people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability</li> </ul>			f) NM		
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	<ul style="list-style-type: none"> <li>• people for whom putting on, wearing or removing a face covering will cause severe distress</li> <li>• people speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate</li> <li>• to avoid the risk of harm or injury to yourself or others</li> <li>• you are also permitted to remove a face covering in order to take medication.</li> </ul> <p><b>Access to face coverings</b></p> <p>Due to the use of face coverings in wider society, staff and pupils are already likely to have access to face coverings. You should have a small contingency supply available for people who:</p> <ul style="list-style-type: none"> <li>• are struggling to access a face covering</li> <li>• are unable to use their face covering as it has become damp, soiled or unsafe</li> <li>• have forgotten their face covering Staff and pupils may consider bringing a spare face covering to wear if their face covering becomes damp during the day.</li> </ul> <p>g) See point f, above.</p> <p><b>Safe wearing and removal of face coverings</b></p> <p>Your contingency plans should already cover a process for when face coverings are worn within your school and how they should be removed</p> <p>h) A specific face mask bin is also situated the front of school for end of day / visit disposal</p> <p>You should communicate this process clearly to pupils, staff and visitors and allow for adjustments to be made for pupils who may be distressed if</p>			h) NM		
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	<p>required to remove a face covering against their wishes, particularly those with SEND.</p> <p>i) School uses a range of arrangements including text message systems to communicate to key stakeholders.</p> <p>When wearing a face covering, staff, visitors and pupils should:</p> <ul style="list-style-type: none"><li>• wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on</li><li>• avoid touching the part of the face covering in contact with the mouth and nose, as it could be contaminated with the virus</li><li>• change the face covering if it becomes damp or if they've touched the part of the face covering in contact with the mouth and nose</li><li>• avoid taking it off and putting it back on a lot in quick succession to minimise potential contamination</li></ul> <p>When removing a face covering, staff, visitors and pupils should:</p> <ul style="list-style-type: none"><li>• wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser before removing</li><li>• only handle the straps, ties or clips</li><li>• not give it to someone else to use</li><li>• if single-use, dispose of it carefully in a household waste bin and do not recycle</li><li>• once removed, store reusable face coverings in a plastic bag until there is an opportunity to wash them.</li><li>• if reusable, wash it in line with manufacturer's instructions at the highest temperature appropriate for the fabric</li><li>• wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser once removed</li></ul>					
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<p>Hygiene, cleaning, Public Health advice</p>		<p>Separate guidance is also available on preventing and controlling infection, including the use of personal protective equipment (PPE), in education, childcare and children’s social care settings.</p> <p><b>1. Ensure good hygiene for everyone</b></p> <p>Hand hygiene Frequent and thorough hand cleaning should now be regular practice. You should continue to ensure that pupils clean their hands regularly. This can be done with soap and water or hand sanitiser.</p> <p>j) Pupils sanitise their hands at key points during the day and have frequent reminders of how to do this effectively.</p> <p>Respiratory hygiene The ‘catch it, bin it, kill it’ approach continues to be very important. The <a href="#">e-Bug COVID-19 website</a> contains free resources for you, including materials to encourage good hand and respiratory hygiene.</p> <p>k) Pupils receive frequent reminders of how to do this effectively with posters placed around the school and sanitising stations in key positions across the school site.</p> <p>Use of personal protective equipment (PPE) Most staff in schools will not require PPE beyond what they would normally need for their work. The <a href="#">use of PPE in education, childcare and children’s social care settings</a> guidance on the use of PPE in education, childcare and children’s social care settings provides more information on the use of PPE for COVID-19.</p> <p>l) Additional PPE equipment is available in school with packs, including face visors, hanging on isolation room doors.</p> <p><b>2. Maintain appropriate cleaning regimes,</b> using standard products such as detergents You should put in place and maintain an appropriate cleaning schedule. This should include regular</p>			<p>j) CTe</p> <p>k)CTe &amp; NM</p> <p>l) NM</p>		
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		<p>cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. UKHSA has published guidance on <a href="#">cleaning of non-healthcare settings</a>.</p> <p>m) As well as the standard cleaning schedule in place across the school, additional cleaning of touch points throughout the school day has been maintained since Sept '21 and will continue into 2022.</p> <p><b>3. Keep occupied spaces well ventilated</b>  When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained.</p> <p>You should identify any poorly ventilated spaces as part of your risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where visitors such as parents are on site, for example, school plays.</p> <p>n) Air quality monitors are fitted in all classrooms allowing 'in the moment' air quality monitoring. Ventilation is managed across the school by individuals in charge of their working areas; communal areas – such as the school hall – have air flow in operation as standard through window/door opening every day managed by the Site Manager and overseen by SBM and Principal. Each individual event has a separate risk assessment in which ventilation is a consideration.</p> <p>Mechanical ventilation is a system that uses a fan to draw fresh air or extract air from a room. These should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.</p> <p>o) This is not presently an option in school.</p> <p>Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations.</p>			<p>m) JF</p> <p>n) CTe &amp; NM</p>		
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	<p>p) n/a</p> <p>Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). You should balance the need for increased ventilation while maintaining a comfortable temperature.</p> <p>q) See (n) above</p> <p>The <a href="#">Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic</a> and <a href="#">CIBSE COVID-19 advice</a> provides more information.</p> <p>CO2 monitors are being provided to state-funded education settings, so staff can quickly identify where ventilation needs to be improved.</p> <p>r) See (n) above</p> <p><b>4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19</b></p> <p>When an individual develops COVID-19 symptoms or has a positive test Pupils, staff and other adults should follow public health advice on <a href="#">when to self-isolate and what to do</a>.</p> <p>They should not come into school if they have symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine).</p> <p>If anyone in your school develops <a href="#">COVID-19 symptoms</a> however mild, you should send them home and they should follow public health advice.</p> <p>For everyone with symptoms, they should avoid using public transport and, wherever possible, be collected by a member of their family or household.</p>					
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		<p>If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the <a href="#">use of PPE in education, childcare and children’s social care settings</a> guidance.</p> <p>Any rooms they use should be cleaned after they have left.</p> <p>s) Isolation Rooms with PPE attached to door are in place in key areas of the school.</p> <p>The household (including any siblings) should follow the UKHSA stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection.</p> <p>Asymptomatic testing Testing remains important in reducing the risk of transmission of infection within schools. Staff and secondary school pupils should continue to test twice weekly at home, with lateral flow device (LFD) test kits, 3-4 days apart. Testing remains voluntary but is strongly encouraged. Secondary schools should also retain a small asymptomatic testing site (ATS) on-site until further notice so they can offer testing to pupils who are unable to test themselves at home. Schools are strongly encouraged to ask parents and other visitors to take a lateral flow device (LFD) test before entering the school.</p> <p>Further information on Daily Rapid Testing can be found in the Tracing close contacts and isolation section.</p> <p>There is no need for primary age pupils (those in year 6 and below) to regularly test, unless they have been identified as a contact for someone who has tested positive for Covid-19 and therefore advised to take lateral flow tests every day for 7 days.</p> <p>Confirmatory PCR tests Staff and pupils with a positive LFD test result should self-isolate in line with <a href="#">stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection</a>.</p>			s) NM		
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		<p>They will also need to get a free PCR test to check if they have COVID-19.</p> <p>Whilst awaiting the PCR result, the individual should continue to self-isolate. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.</p> <p>Additional information on PCR test kits for schools and further education providers is available</p>					
<b>School Workforce</b>	H	<p><b>School Workforce</b></p> <p>From 13 December office workers who can work from home should do so. Anyone who cannot work from home, such as those involved in the face-to-face provision of education, should continue to go to their place of work. School leaders are best placed to determine the workforce required to meet the needs of their pupils. School leaders will need to consider whether it is possible for specific staff undertaking certain roles to work from home without disrupting to face-to-face education.</p> <p>t) School-based office role considered by Principal in Dec '21 – present functioning requires in-school attendance but this will be reviewed, especially in the event of Outbreak Management Plan thresholds being met.</p> <p>Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), <a href="#">guidance on protecting people who are CEV from COVID-19</a> and high or higher-risk are not being advised to shield again. If staff were previously identified as being in one of these groups, they are advised to continue to follow the guidance</p>	Yes	N/A	LC unless stated	L	H

		<p>contained in Coronavirus: <a href="https://www.gov.uk/guidance/covid-19-coronavirus-restrictions-what-you-can-and-cannot-do">https://www.gov.uk/guidance/covid-19-coronavirus-restrictions-what-you-can-and-cannot-do</a></p> <p>It is important that everyone adheres to this guidance, but previously classified CEV people may wish to think particularly carefully about the additional precautions they can personally continue to take.</p> <p>In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Whilst individual risk assessments are not required, employers are expected to discuss any concerns that people previously considered CEV may have.</p> <p>u) Previous CEV staff members discuss with their line manager / Principal any concerns around guidance and their role in school.</p> <p>Employers will need to follow this specific guidance for pregnant employees. <a href="#">COVID-19 vaccination: women of childbearing age, currently pregnant or breastfeeding - GOV.UK (www.gov.uk)</a></p> <p>Your workplace risk assessment should consider any risks to female employees of childbearing age and, in particular, risks to new and expectant mothers. You should also consider the needs of pregnant pupils.</p> <p>v) New / expectant mothers are encouraged to approach line manager / Principal to discuss individual risks in relation to specific guidance for pregnant employees.</p> <p>Employers should be able to explain the measures they have in place to keep staff safe at work. The Health and Safety Executive (HSE) has published guidance on protecting vulnerable workers, including advice for employers and employees on how to talk about reducing risks in the workplace.</p> <p>For home working, employers should consider whether home working is appropriate for workers facing mental or physical health difficulties, or those with a particularly challenging home working environment. Employers should discuss concerns with staff.</p>					
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		<p><b>Other considerations</b></p> <p>You should ensure that key contractors are aware of the school’s control measures and ways of working.</p> <p>w) Any visiting contractors are welcomed and the school’s control measures explained upon entry into the vestibule area of school. Individuals unable / unwilling to comply with school’s control measure are not granted access into the school building.</p>			w) LCt & BH		
<p><b>2)Managing suspected cases of Covid-19</b></p> <p><b>Stepping measures up and down</b></p>	H	<p><b>Stepping measures up and down</b></p> <p>You should have contingency plans (sometimes called outbreak management plans) outlining what you would do if children, pupils, students or staff test positive for COVID19, or how you would operate if you were advised to take extra measures to help break chains of transmission.</p> <p>Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools should only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible.</p> <ul style="list-style-type: none"> <li>Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission. For most settings it will make sense to think about taking extra action if the number of positive cases substantially increases. Information on what circumstances might lead you to</li> </ul>	Yes	N/A	LC unless stated	L	H

consider taking additional action, and the steps you should work through, can be found in the [contingency framework](#).

The contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings.

Local authorities, directors of public health (DsPH) and UKHSA health protection teams (HPTs) can recommend measures described in the contingency framework in individual education and childcare settings – or a small cluster of settings – as part of their outbreak management responsibilities.

### **Contingency planning**

All education and childcare settings should already have contingency plans (sometimes called outbreak management plans) describing what they would do if children, pupils, students or staff test positive for COVID-19, or how they would operate if they were advised to reintroduce any measures described in this document to help break chains of transmission.

COVID-19 resilience and planning is now more important than ever. Settings do not need to reformat their existing contingency plans to specific templates, but the plans should be kept robust and up to date in light of the advice set out here.

x) **Outbreak Plan here:** [Outbreak-Management-Plan-Oldbury-Park-Sept-21.pdf](#)

		<p>A good plan should cover:</p> <ul style="list-style-type: none"><li>• roles and responsibilities</li><li>• when and how to seek public health advice</li><li>• details on the types of control measures you might be asked to put in place (described in <a href="#">measures that settings should plan for</a> and <a href="#">your sector's guidance</a>)</li></ul> <p>For each control measure you should include:</p> <ul style="list-style-type: none"><li>• actions you would take to put it in place quickly</li><li>• how you would ensure every child, pupil or student receives the quantity and quality of education and support to which they are normally entitled</li><li>• how you would communicate changes to children, pupils, students, parents, carers and staff</li></ul>					
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Attendance	H	<p><b>Admitting children into school</b></p> <p>In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others. If a parent or carer insists on a pupil attending your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Your decision would need to be carefully considered in light of all the circumstances and current public health advice</p> <p>y) School communicates with parents updated flowchart guidance on isolation / access to school in situations of pupils with symptoms. A common sense and supportive approach is undertaken.</p> <p>All clinically extremely vulnerable (CEV) children and young people should attend their education setting unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their clinician or other specialist not to attend.</p> <p>Further information is available in the guidance on <a href="#">supporting pupils at school with medical conditions</a>.</p> <p>z1) Individual communications take place with parents of CEV pupils or pupils living in families with CEV members. Individual and specific measures are employed on a case-by-case basis as required to support the attendance of pupils to school.</p> <p><b>Attendance</b> School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is required to self-isolate or quarantine because of COVID-19 in accordance with relevant legislation or guidance published by UKHSA or the DHSC, they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be recorded as code I (illness). For pupils abroad who are facing challenges to return, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply. Further guidance about the use of codes is provided in the <a href="#">school attendance guidance</a></p>	Yes	N/A	LC unless stated	L	H
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<b>Pupil wellbeing and support</b>	H	<p><b>Pupil wellbeing and support</b></p> <p>Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. You can access useful links and sources of support on <a href="#">promoting and supporting mental health and wellbeing in schools</a>.</p> <p><b>z2) The school's Access and Inclusion team, including SENDCo and Pastoral Lead, work to support pupil wellbeing at whole school level through the Personal Development strand school provision. Individual and acute cases are managed alongside the DSL/DSLs where required, with key external agencies referred to where required.</b></p>	Yes	N/A	SD/E M	L	H
<b>Educational Visits</b>	N/A as separate RA required for each visit	<p><b>Educational visits</b></p> <p>You should undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment. <a href="#">General guidance</a> about educational visits is available and is supported by specialist advice from the <a href="#">Outdoor Education Advisory Panel (OEAP)</a>.</p> <p><b>SEPARATE RISK ASSESSMENTS FOR EACH EDUCATIONAL VISIT ARE UNDERTAKEN – these are overseen by the school's EVC</b></p>	Yes	N/A	TW	L	H

Spare Section	N/A	RISK ASSESSMENT ENDS					
Operational Guidance	N/A	<p><b>Remote education</b> Where appropriate, you should support those who need to self-isolate because they have tested positive to work or learn from home if they are well enough to do so. Schools subject to the <a href="#">remote education temporary continuity direction</a> are required to provide remote education to pupils covered by the direction where their attendance would be contrary to government guidance or legislation around COVID-19. You should maintain your capacity to deliver high-quality remote education across this academic year, including for pupils who are abroad, and facing challenges to return due to COVID-19 travel restrictions, for the period they are abroad. Independent Schools (not including academies) are only covered by the remote education temporary continuity direction in relation to state-funded pupils in their schools. However, they are still expected to meet the Independent School Standards in full at all times. The remote education provided should be equivalent in length to the core teaching pupils would receive in school. You should work collaboratively with families and put in place</p>	Yes	N/A	LC & TW	L	H

		<p>reasonable adjustments so that pupils with special educational needs and disabilities (SEND) can successfully access remote education. Full expectations for remote education, support and resources can be found on the <a href="#">get help with remote education service</a>.</p>					
<p><b>Wraparound provision and extra-curricular activity</b></p>	<p>N/A</p>	<p><b>Wraparound provision and extra-curricular activity</b></p> <p>More information on planning extra-curricular provision can be found in the guidance for <a href="#">providers who run community activities, holiday clubs, after-school clubs, tuition and other out-of-school provision for children</a></p>					

<b>Inspection and Accountability</b>	N/A	<b>Inspection For state-funded schools,</b>  Ofsted has resumed its programme of routine inspections and will aim to inspect every state-funded school within the next 5 academic years. This will mean an extension of up to 6 terms in the inspection interval for those schools not inspected since the start of the pandemic. Within the 5-year period, Ofsted will continue to prioritise schools most in need of inspection, particularly those with the lowest Ofsted grades. It will also prioritise outstanding schools that were previously exempt from routine inspection that have gone the longest without a visit					
<b>Spare Operational Section</b>	N/A	OPERATIONAL SECTION ENDS					