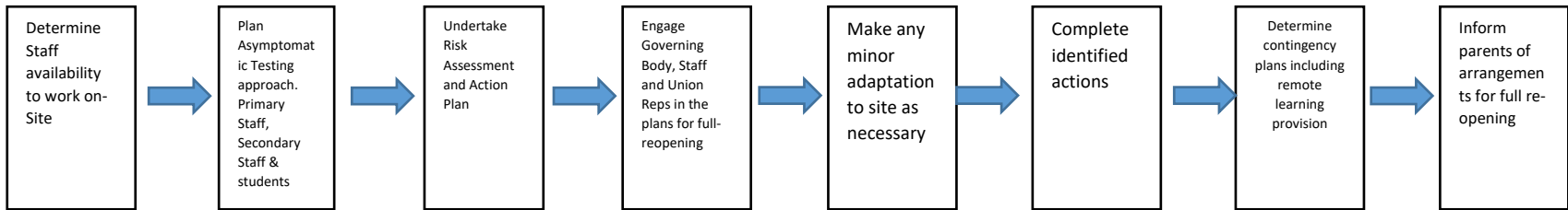




SUPPLEMENTARY INFORMATION Coronavirus (Covid 19) – REVISION 4

ACTIVITY: Coronavirus (COVID-19) Spread and Government Advice 01.03.21		DATE OF ASSESSMENT 01.03.21 (Amended)
ESTABLISHMENT/SCHOOL SS Peter and Paul RC School	SECTION/TEAM All	
WHO MIGHT BE HARMED? Employees, pupils, trainees, students and visitors		HOW MANY ARE AFFECTED? 250+
<p>Steps for all pupils returning to school from 8th March 2021. This document has been produced in conjunction with all Government guidance. All risk assessed to minimise the spread of the virus as far as possible. The risk Assessment cannot guarantee safety of pupils and staff but if followed will mitigate risk as far as possible. It is staff members’ responsibility to read and understand this document and implement the measures described It is staff members’ responsibility to ensure that pupils adhere to all social distancing (SD) measures</p>  <pre> graph LR A[Determine Staff availability to work on-Site] --> B[Plan Asymptomatic Testing approach. Primary Staff, Secondary Staff & students] B --> C[Undertake Risk Assessment and Action Plan] C --> D[Engage Governing Body, Staff and Union Reps in the plans for full-reopening] D --> E[Make any minor adaptation to site as necessary] E --> F[Complete identified actions] F --> G[Determine contingency plans including remote learning provision] G --> H[Inform parents of arrangements for full re-opening] </pre>		
Based on information https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools and www.gov.uk/schools_coronavirus_operational_guidance.pdf		

HAZARDS (including inadequate / lack of arrangements)	EXISTING CONTROL MEASURES	If in place X if not	ADDITIONAL CONTROL MEASURES	RESIDUAL RISK RATING High, Medium, Low
Premises and equipment, water, etc. not maintained to statutory requirements:	<p>Premises and utilities have been health and safety checked and building is compliant</p> <ul style="list-style-type: none"> • Water treatments • Fire alarm testing • Repairs • PAT testing • Fridges, Boiler/ heating servicing • Internet services • Any other statutory inspections • Insurance covers reopening arrangements 	Yes	<ul style="list-style-type: none"> • Site Supervisor (SS) has continued with daily and weekly checks around school in line with his job description. • All external inspections have taken place as arranged. • All repairs are undertaken via STC Asset Management exam PAT Testing completed in line with regulations • Fridges and microwaves currently available to staff to be thoroughly cleaned at the end of each day in line with current regulations • Boiler and heating serviced by STC in accordance with regulations • Internet and IT support provided by Openzone • All current school RA and protocols shared with staff. • There may be incidents in school where social distancing is not safe to do so (eg in case of fire). Where possible SD will be maintained. • Insurance covered by LA/Diocese • Use of kitchen - only 1 person allowed in at a time. • Use of toilet - 1 person in the toilet room at time. If on 	L

			<p>entering the toilet room - you note the use of one of the toilets - it is staff responsibility to leave the toilet room and wait until it is clear of staff before entering and using the facilities.</p> <ul style="list-style-type: none"> ● Use of staff break areas- ensure SD measures are followed. ● Any areas/equipment used by adults within school should be cleaned after use e.g. kettle, boiler, work bench etc.(with the exception of the toilet) 	
<p>Fire Risk Assessment and evacuation procedures reviewed and disseminated to all staff.</p>	<p>The 'BUILDING RA COVID' assessment has been revised and updated for the general running of the building.</p> <p>NB: TWFRS who has confirmed that wedging doors open is not best practice, however due to the COVID-19 crisis wedging classroom doors can be done, but cross corridor doors and doors leading on to a fire escape or stairway must remain in the closed position at all times</p> <p>Any door wedged open must have the wedge removed when the class is vacant even for the shortest period and the school must risk assess this.</p> <p>As for installing barriers in front of doors this is not acceptable under any circumstance, should an area need to be segregated then the use of signage and Fire Exit Door Security Seals should be used which would snap if the door is forced open allowing anyone emergency egress if necessary.</p> <p>Large quantities of high-alcohol-content hand sanitiser should be stored in a locked storage cupboard or metal cabinet and controlled like other combustibles.</p>	YES	<p>Fire procedure:</p> <ul style="list-style-type: none"> ● The teacher/class lead in each classroom bubble is to take charge of pupils and staff in their bubble and ensure everyone leaves the building. Staff are responsible for closing any doors that are wedged open in their bubble. ● All other staff to ensure they leave the building as soon as possible. ● Admin staff to ensure a record of all staff on site is available. It is essential that all staff on site sign in with class register. ● Teacher to inform reception staff of any missing people from their bubble ● No member of staff to enter building if a fire incident is in place unless they are trained as a fire warden. ● Admin staff/SS to telephone 999 emergency services as soon as possible. ● Fire evacuation point to remain as school yard. Where possible SD will be maintained if safe to 	L

			<p>do so at assembly point. New internal layouts and access points agreed.</p> <ul style="list-style-type: none"> • Staff entrance – reception, carpark, nursery, infant corridor. • Pupil entrances via classroom emergency doors. Rooms to be well ventilated at all times, classroom emergency exit doors can remain open as agreed with TWFRS. Classroom and office doors to be wedged open during use but left closed when vacated. • Hall doors to be wedged open when the reception area is staffed but closed when vacated. • All internal and external fire doors to remain closed as per normal building practice. • Fires exit door safety seals to be fitted to internal doors where necessary to maintain segregation and safety <p>All fire escapes routes to be kept clear at all times, as per normal building practice</p>	
<p>Child/Adult is unwell and it is believed that they have been exposed to COVID-19.</p>	<p>Ensure that pupils, staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, or have tested positive in the last 10 days, and ensuring anyone developing those symptoms during the school day is sent home, are essential actions to reduce the risk in schools and further drive down transmission of coronavirus (COVID-19). All schools must follow this process and ensure all staff are aware of it.</p> <p>If anyone in the school becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to</p>	YES	<p>Procedure for pupils with symptoms</p> <ul style="list-style-type: none"> • Any child showing any symptoms will be taken to the isolation rooms to await their parents' collection. • Classroom staff take child to the isolation room. Sit child near an open window. • Staff to put on all necessary PPE equipment. 	L

	<p>follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection', which sets out that they must self-isolate for at least 10 days and should arrange to have a test to see if they have coronavirus (COVID-19). If they have tested positive whilst not experiencing symptoms but develop symptoms during the isolation period, they should restart the 10 day isolation period from the day they develop symptoms. This only applies to those who begin their isolation on or after 30 July. Other members of their household (including any siblings) should self-isolate for 10 days from when the symptomatic person first had symptoms. If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people. If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.</p> <p>PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) guidance. As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital. Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate</p>		<ul style="list-style-type: none"> ● SLT/Admin to call parents if any child shows any symptoms. ● Parents informed that they must be available to collect their child immediately if we call them with this information. If a parent is unable or unwilling to collect their child immediately, this will be dealt with as a safeguarding issue by SLT. ● Full area not to be used until cleaning is carried out, practise SD whenever possible. ● First aider/ admin to ensure all protocols are followed (paperwork, informing parents, etc.) before the end of the school day. All trained first aiders must exercise extreme caution when treating any injury to any party as the social distancing measure of 2 metres may have to be breached to facilitate treatment by close and direct contact ● First aiders must assess the injured party from a distance of 2 metres and where treatment has been identified as required first aiders must wear latex free protective gloves and protective face masks whilst treating any type of injury or casualty and must wash hands immediately after treatment has been completed. 	
--	---	--	---	--

	<p>unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) or they have been requested to do so by NHS Test and Trace. Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household bleach after they have left to reduce the risk of passing the infection on to other people. See the COVID-19: cleaning of non-healthcare settings guidance.</p> <p>Public Health England is clear that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).</p>		<ul style="list-style-type: none"> ● If a casualty requires CPR then this should be administered by chest compressions only and not rescue breaths as adequate infection control for first aiders cannot be maintained. ● First aider to clean areas used during this process before returning to classroom bubble. <p>Person with symptoms -</p> <ul style="list-style-type: none"> ● Parent/Member of staff MUST organise a test ● Positive result = 10 days isolation AND all other people in their bubble & other people they have been in contact with person to be tested. (14 days isolation) ● Negative result = children/staff member come back into school. ● Symptom advice shared on social media. "Do not attend ..." poster shared with parents. ● Isolation room identified on main and nursery sites. (Small server room in main school & small room in Nursery) ● Named first aiders on site during school day. <p>Normal first aid:</p> <ul style="list-style-type: none"> ● Normal first aid can be carried out in bubble by qualified first aider (if one is 	
--	--	--	---	--

			<p>not available or additional help is needed) it can be carried out by the designated first aider in the first aid station. First aid kits/PPE equipment located in each bubble.</p> <ul style="list-style-type: none">● If needed the classroom staff to take child to first aid area and contact named first aider.● Child to sit near window, with window open.● When first aider arrives, they put on all necessary PPE equipment.● Once first aider is prepared, classroom staff can now return to their classroom.● CG to ensure all first aid kits are checked on a weekly basis and supplies replenished.● First aiders to follow government guidelines.● First aiders must wash their hands or use hand sanitiser before and after treating a casualty.● First aiders to consider cross contamination that could occur which was covered in their training.● All waste will be disposed of by cleaner during the day. This is part of her work schedule. <p>First aider to ensure all protocols are followed (paperwork, informing parents, etc.) before the end of the school day.</p>	
--	--	--	---	--

			<p>All trained first aiders must exercise extreme caution when treating any injury to any party as the social distancing measure of 2 metres may have to be breached to facilitate treatment by close and direct contact.</p> <p>Administration of medication:</p> <ul style="list-style-type: none"> • Administration of medication will be performed in the usual manner, ensuring SD measures at all times. • Areas used or touched during first aid will be cleaned by first aider before returning pupil to classroom. • Gloves must be worn during this process and hands washed before and after process. • All areas used during this process must be cleaned by staff member administering the medication. • 	
<p>Risk of coronavirus infection spreading to children and staff due to inadequate infection control procedure</p>	<p>The school will ensure that pupils clean their hands regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating. Regular and thorough hand cleaning is going to be needed for the foreseeable future. Points to consider and implement:</p> <ul style="list-style-type: none"> • has the school enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly • can the school ensure that there is enough supervision when using hand sanitiser to eliminate ingestion. Small children and pupils with complex needs should continue to be helped to clean their 		<ul style="list-style-type: none"> • Key hygiene information located around school. Prevent and symptoms information shared with pupils at the start of each day. • Protocol for parents - asking them to share good practice with pupils at home and to encourage the continuation of this behaviour at school. Protocol lists these specific areas of advice. <p>Cleaning Information:</p> <ul style="list-style-type: none"> • Normal cleaning hours have 	<p>L</p>

	<p>hands properly. Skin friendly skin cleaning wipes can be used as an alternative</p> <ul style="list-style-type: none"> the school will build these routines into school culture, supported by behaviour expectations and helping ensure younger children and those with complex needs understand the need to follow them Soap and water is more effective than using sanitisers <p>The 'catch it, bin it, kill it' approach continues to be very important, so schools must ensure that they have enough tissues and bins available in the school to support pupils and staff to follow this routine. As with hand cleaning, schools must ensure younger children and those with complex needs are helped to get this right, and all pupils understand that this is now part of how school operates.</p> <p>Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and the staff working with them and is not a reason to deny these pupils face-to-face education.</p> <p>Public Health England does not (based on current evidence) recommend the use of face coverings in schools. This evidence will be kept under review. They are not required in schools as pupils and staff are mixing in consistent groups, and because misuse may inadvertently increase the risk of transmission. There may also be negative effects on communication and thus education. Face coverings are required at all times on public transport (for children over the age of 11) or when attending a hospital as a visitor or outpatient.</p> <p>Points to consider and implement:</p> <ul style="list-style-type: none"> putting in place a cleaning schedule that ensures cleaning is generally enhanced and 		<p>been increased through the current Cleaning SLA with STC to enable cleaners to be on site during the school day/ responsibility shared with SS. SS – 7.00am- 11.30am, Cleaner 12.00noon -2.00pm, SS – 3.00pm- 5.30pm/6.00pm, Cleaners 3.30pm- 5.30pm.</p> <ul style="list-style-type: none"> Cleaners to pay particular attention to toilets, telephones, copier machines, door handles and doors and keyboards. After each use of school equipment, staff members are expected to wipe the item clean (eg photocopier, keyboard, telephone, etc.). Non classroom members of staff to use their workstation only and Wipe down their own work area, including chair, telephone, keyboard, at the end of each working day. SS will ensure all cleaning in school will be at the highest level All pupils and staff members have access to soap and water - either in classroom bubble or in the toilet areas. All classroom bubbles have hand sanitiser Cleaning equipment - stock take conducted on a daily basis to ensure good stocks of everything needed in school to ensure good hygiene measures. <p>Cleaning of toilets after use:</p> <ul style="list-style-type: none"> Staff and pupil toilets will be cleaned regularly throughout the 	
--	---	--	---	--

	<p>includes:</p> <ul style="list-style-type: none"> ○ more frequent cleaning of rooms / shared areas that are used by different groups ○ frequently touched surfaces being cleaned more often than normal ● toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet - different groups being allocated their own toilet blocks could be considered but is not a requirement if the site does not allow for it <p>See COVID-19: cleaning of non-healthcare settings guidance for cleaning information.</p>		day.	
	<p>Face Coverings. Ensure face coverings are used in recommended circumstances.</p> <ul style="list-style-type: none"> ● In primary schools, face coverings should be worn by staff and adult visitors in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). ● Children in primary school do not need to wear a face covering. ● Transparent face coverings which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate can also be worn. There is currently limited evidence regarding the effectiveness or safety of transparent face coverings, but they may be more effective in reducing the spread of coronavirus (COVID19) than not wearing a face covering at all. Those who rely on visual signals for communication, or speak to or provide support to such individuals, are currently also exempt from any requirement to wear face coverings in schools or in public places. Face visors or shields should not be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in preventing aerosol transmission. In an education setting 	Yes	<ul style="list-style-type: none"> ○ PPE available for use by staff if required, but compulsory whilst administering first aid/personal care. Video (from PHE/NHS) shared to staff about how to use the equipment safely. ○ Staff and pupils wearing face covering are advised to: <ul style="list-style-type: none"> ● wash hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting face covering on and after removing it. ● Avoid touching face or face covering as you could contaminate 	L

	<p>environment they are unlikely to offer appropriate protection to the wearer.</p> <p>Exemptions Some individuals are exempt from wearing face coverings. This applies to those who:</p> <ul style="list-style-type: none"> • cannot put on, wear or remove a face covering because of a physical impairment or disability, illness or mental health difficulties • speak to or provide help to someone who relies on lip reading, clear sound or facial expression to communicate The same exemptions will apply in education and childcare settings and you should be sensitive to those needs, noting that some people are less able to wear face coverings and that the reasons for this may not be visible to others. 		<p>them with germs from hands.</p> <ul style="list-style-type: none"> •Change face covering if it becomes damp or you have been touching it. •Continue to wash hands regularly. <p>Change and wash face covering daily.</p> <ul style="list-style-type: none"> ○ If the material is washable, was in line with manufacturer's instructions. If it is not washable - dispose of it carefully in the normal waste. ○ Practise SD wherever possible. ○ PPE available for all staff wishing to use it. ○ PPE must be used by first aiders. ○ Staff email - information video attached showing how to use PPE, staff declaration forms re virus and public health notices. <p>No practical lessons to be undertaken without consent of SLT.</p>	
--	--	--	---	--

<p>Risk of coronavirus infection spreading due to large class sizes and reduced space</p>	<p>The school will minimise contacts and mixing between people while delivering a broad and balanced curriculum.</p> <p>The overarching principle to apply is reducing the number of contacts between children and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and both measures will help, but the balance between them will</p>	<p>Yes</p>		<p>L</p>
<p>Risk of coronavirus infection spreading to children and staff due to lack of PPE</p>	<p>Read the guidance on safe working in education, childcare and children's social care for more information about preventing and controlling infection, including when, how PPE should be used, what type of PPE to use, and how to source it.</p>	<p>Yes</p>	<p>PPE available in each bubble to all staff</p>	<p>L</p>
<p>Failure to use test and trace leading coronavirus infection spreading to children and staff</p>	<p>Schools must ensure they understand the NHS Test and Trace process and how to contact their local Public Health England health protection team. Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:</p> <ul style="list-style-type: none"> • book a test if they are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit • provide details of anyone they have been in close contact <p>with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace</p> <ul style="list-style-type: none"> • self-isolate if they have been in close contact with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19) <p>Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS testing and tracing for</p>	<p>Yes</p>		<p>L</p>

[coronavirus website](#), or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing.

The government will ensure that it is as easy as possible to get a test through a wide range of routes that are locally accessible, fast and convenient. We will release more details on new testing avenues as and when they become available and will work with schools so they understand what the quickest and easiest way is to get a test. From the autumn term, all schools were be provided with a small number of home testing kits that they can give directly to parents/carers collecting a child who has developed symptoms at school, or staff who have developed symptoms at school, where they think providing one will significantly increase the likelihood of them getting tested.

Advice will be provided alongside these kits. Schools should ask parents and staff to inform them immediately of the results of a test:

- if someone tests negative, if they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can stop self-isolating.
- if someone tests positive, they should follow the '[stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)' and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day when they first became ill. If they

	<p>still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 14 days.</p> <p>Local PH contacts:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The Covid inbox should be used in the first instance to direct any queries, as well as any information regarding any suspected or confirmed cases to COVID@southtyneside.gov.uk This inbox is monitored 7 days a week by the public health team. <input type="checkbox"/> Public Health England (North East and Yorkshire Region) 0300 303 8596 <input type="checkbox"/> Claire Mawson, Senior Public Health Advanced Practitioner claire.mawson@southtyneside.gov.uk 07776 992033 (part- time Monday-Wednesday am) <input type="checkbox"/> Sam Start, Senior Public Health Advanced Practitioner samantha.start@southtyneside.gov.uk 07776997869 (Wednesday pm-Friday) <p>Testing: Primary schools should follow the Rapid asymptomatic coronavirus (COVID-19) testing for staff in primary schools, school-based nurseries and maintained nursery schools guidance.”</p> <p>Contain any outbreak by following local health protection team advice:“If schools have two or more confirmed cases within 10 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak and should call the dedicated advice service, who will escalate the issue to the PHE local health protection team where necessary and advise if additional action is required.”</p>		<p>These details will be displayed on office walls.</p> <p>Staff who have agreed to take the lateral flow tests take them twice a week on a Wednesday and Sunday evening. The results are reported directly to the NHS and are collated in school.</p>	
Failure to manage confirmed cases	Schools must take swift action when they become aware that someone who has attended has tested	YES		L

<p>of coronavirus (COVID-19) amongst the school community</p>	<p>positive for coronavirus (COVID-19). Schools should contact the local health protection team. This team will also contact schools directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the school – as identified by NHS Test and Trace.</p> <p>The health protection team will carry out a rapid risk assessment to confirm who has been in close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate.</p> <p>The health protection team will work with schools in this situation to guide them through the actions they need to take. Based on the advice from the health protection team, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 14 days since they were last in close contact with that person when they were infectious. Close contact means:</p> <ul style="list-style-type: none"> • direct close contacts - face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin) • proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual • travelling in a small vehicle, like a car, with an infected person <p>The health protection team will provide definitive advice on who must be sent home. To support them in doing so, we recommend schools keep a record of pupils and staff in each group, and any close contact that takes places between children and staff in different groups (see section 5 of system of control for more on grouping pupils). This should be a proportionate recording process. Schools do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is</p>		<ul style="list-style-type: none"> • Daily % of attendance recorded. • Record kept of children's absence because of sickness. • Record kept of children/staff absent because of self-isolating – dates began and due back. • Daily phone calls made by PW to absent families. 	
---	---	--	---	--

	<p>overly burdensome.</p> <p>A template letter will be provided to schools, on the advice of the health protection team, to send to parents and staff if needed.</p> <p>Schools must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.</p> <p>Household members of those contacts who are sent home do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within their 14-day isolation period they should follow ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’. They should get a test, and:</p> <ul style="list-style-type: none"> • if the test delivers a negative result, they must remain in isolation for the remainder of the 14-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days. • if the test result is positive, they should inform their setting immediately, and must isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 14-day isolation period). Their household should self-isolate for at least 14 days from when the symptomatic person first had symptoms, following ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’ <p>Schools should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.</p> <ul style="list-style-type: none"> • Primary schools Staff in primary schools will continue to test with LFDs twice a week at 		<p>Updates are shared via email, school website and Facebook with parents aware of current legislation.</p>	
--	--	--	---	--

	<p>home, as per existing guidance on testing for staff in primary schools and nurseries.</p> <p>Further guidance is available on testing and tracing for coronavirus (COVID-19).</p> <p>Local PH contacts:</p> <ul style="list-style-type: none"> • The Covid inbox should be used in the first instance to direct any queries, as well as any information regarding any suspected or confirmed cases to COVID@southtyneside.gov.uk This inbox is monitored 7days a week by the public health team. • Public Health England (North East and Yorkshire Region) 0300 303 8596 • Claire Mawson, Senior Public Health Advanced Practitioner claire.mawson@southtyneside.gov.uk 07776 992033 (part- time Monday-Wednesday am) • Sam Start, Senior Public Health Advanced Practitioner samantha.start@southtyneside.gov.uk 07776997869 (Wednesday pm-Friday) 			
<p>Failure to contain any outbreak by following local health protection team advice</p>	<p>If schools have two or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak, and must continue to work with their local health protection team who will be able to advise if additional action is required.</p> <p>In some cases, health protection teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – perhaps the whole site or year group. If schools are implementing controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole school closure based on cases within the school will not generally be necessary, and should not be considered except on the advice of health protection teams.</p> <p>In consultation with the local Director of Public Health,</p>	<p>Yes</p>		<p>L</p>

	<p>where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person's class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.</p>			
<p>Risk of coronavirus infection spreading due to use of transport</p>	<p>Adjust transport arrangements where necessary including:</p> <ul style="list-style-type: none"> • encourage parents and children and young people to walk or cycle to their education setting where possible • make sure schools, parents and young people follow the Coronavirus (COVID-19): safer travel guidance for passengers when planning their travel • ensure that transport arrangements cater for any changes to start and finish times • communicating revised travel plans clearly to contractors, local authorities and parents where appropriate (for instance, to agree pick-up and drop-off times) <p>Social distancing has significantly reduced available transport capacity. This guidance sets out a new framework for supporting transport to and from schools from the autumn term.</p> <p>We are making a distinction between dedicated school transport and wider public transport:</p> <ul style="list-style-type: none"> • by dedicated school transport, we mean services that are used only to carry pupils to school. This includes statutory home to school transport, but may also include some existing or new commercial travel routes, where they carry school pupils only • by public transport services, we mean routes which are also used by the general public <p>Dedicated school transport, including statutory provision Pupils on dedicated school services do not mix with the general public on those journeys and tend to be consistent. This means that the advice for passengers on public transport to adopt a social</p>		<p>Not applicable</p>	

	<p>distance of two metres from people outside their household or support bubble, or a 'one metre plus' approach where this is not possible, will not apply from the autumn term on dedicated transport. The approach to dedicated transport should align as far as possible with the principles underpinning the system of controls set out in this document and with the approach being adopted for your school. It is important to consider:</p> <ul style="list-style-type: none">• how pupils are grouped together on transport, where possible this should reflect the bubbles that are adopted within school• use of hand sanitiser upon boarding and/or disembarking• additional cleaning of vehicles• organised queuing and boarding where possible• distancing within vehicles wherever possible• the use of face coverings for children over the age of 11, where appropriate, for example, if they are likely to come into very close contact with people outside of their group or who they do not normally meet <p>Dedicated school services can take different forms. Some journeys involve coaches regularly picking up the same pupils each day, others involve use of a minibus whilst other services are used by different pupils on different days, or by pupils with SEND. The precise approach taken will need to reflect the range of measures that are reasonable in the different circumstances.</p> <p>It will also require a partnership approach between local authorities, schools, trusts, dioceses and others. In particular, it is imperative that schools work closely with local authorities that have statutory responsibility for 'home to school transport' for many children, as well as a vital role in working with local transport providers to ensure sufficient bus service provision.</p> <p>Given the pressures on public transport services it may also be necessary to work with local authorities so that they can identify where it might be necessary to provide additional dedicated school transport services, including in places where these services do</p>			
--	--	--	--	--

	<p>not currently operate. See DfE guidance Transport-to-school-and-other-places-of-education-autumn-term-2020</p> <p>Wider public transport STC are currently working with transport providers and schools to plan safe, consistent transport for all staff and pupils.</p> <p>Families using public transport should refer to the safer travel guidance for passengers and Transport-to-school-and-other-places-of-education-autumn-term-2020</p>			
<p>Risk of coronavirus infection spreading to shielded and clinically vulnerable adults</p>	<p>Where schools implement the system of controls outlined in this document, in line with their own workplace risk assessment, PHE and DHSC confirm that these measures create an inherently safer environment for children and staff where the risk of transmission of infection is substantially reduced.</p> <p>As a result, on current evidence, PHE and DHSC advise that schools are not currently considered high risk settings when compared to other workplace environments.</p> <p>From 8 March, wider government policy on going to work is expected to change, with employers to be given more discretion about where staff work. Most school-based roles are not ideally suited to home working and schools may expect most staff to return to work in settings. Some roles, such as some administrative roles, may be conducive to home working, and school leaders should consider what is feasible and appropriate.</p> <p>All staff should follow the measures set out in the system of controls section of this guidance to minimise the risks of transmission. This includes continuing to observe good hand and respiratory hygiene and maintaining social distancing in line with the</p>	<p>YES</p>	<p>CV staff have individual risk assessments</p> <p>Staff who have been identified as CEV and asked to shield until the 31st March have contacted by their doctors and have been given written advice that it is safe for them to attend school.</p>	<p>L</p>

	<p>provisions as set out in part 5 of the 'Prevention' section. School leaders should explain to staff the measures the school is putting in place to reduce risks. We anticipate adherence to the measures in this guidance will provide the necessary reassurance for staff to return to schools. If staff are concerned, including those who may be clinically vulnerable, clinically extremely vulnerable or at increased comparative risk from coronavirus, we recommend school leaders discuss any concerns individuals may have around their particular circumstances and reassure staff about the protective measures in place.</p> <p>Staff who are clinically extremely vulnerable Rates of community transmission of coronavirus (COVID-19) are now reduced to levels below those seen when shielding was introduced. Shielding measures will therefore be paused from the 1 August 2020, with the exception of areas where local lockdown means that shielding will continue. Therefore, we advise that those who are clinically extremely vulnerable can return to school in September 2020 provided their school has implemented the system of controls outlined in this document, in line with the school's own workplace risk assessment. In all respects, the clinically extremely vulnerable should now follow the same guidance as the clinically vulnerable population, taking particular care to practise frequent, thorough hand washing, and cleaning of frequently touched areas in their home and/or workspace.</p> <p>Staff who are clinically vulnerable Clinically vulnerable staff can return to school in September. While in school they should follow the sector-specific measures in this document to minimise the risks of transmission. This includes taking particular care to observe good hand and respiratory hygiene, minimising contact and maintaining social distancing in line with the provisions set out in section 5 of the 'Prevention' section of this guidance. This provides that ideally, adults should maintain 2 metre distance from others, and where this is not possible avoid close face to face contact and minimise time spent within 1 metre of others. While the risk of transmission between young</p>			
--	---	--	--	--

	<p>children and adults is likely to be low, adults should continue to take care to socially distance from other adults including older children/adolescents. People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.</p> <p>Staff who are pregnant</p> <p>Pregnant women are in the 'clinically vulnerable' category, and are generally advised to follow the above advice, which applies to all staff in schools. Employers should conduct a risk assessment for pregnant women in line with the Management of Health and Safety at Work Regulations 1999 (MHSW) https://www.southtyneside.gov.uk/article/36422/Health-and-Safety-Manual-2019 - see Section 3.10 and Appendix F.</p> <p>The Royal College of Obstetrics and Gynaecology (RCOG) has published occupational health advice for employers and pregnant women. This document includes advice for women from 28 weeks gestation or with underlying health conditions who may be at greater risk. We advise employers and pregnant women to follow this advice and to continue to monitor for future updates to it.</p> <p>Staff who may otherwise be at increased risk from coronavirus (COVID-19)</p> <p>Some people with particular characteristics may be at comparatively increased risk from coronavirus (COVID-19), as set out in the COVID-19: review of disparities in risks and outcomes report, which looked at different factors including age and sex, where people live, deprivation, ethnicity, people's occupation and care home residence.</p> <p>These staff can return to school in September as long as the system of controls set out in this guidance are in place. The reasons for the disparities are complex and there is ongoing research to understand and translate these findings for individuals in the future.</p> <p>People who live with those who have comparatively</p>			
--	---	--	--	--

	increased risk from coronavirus (COVID-19) can attend the workplace.			
Risk of coronavirus infection spreading to shielded and clinically vulnerable persons via pupil or staff attending school	<p>Pupils who are shielding or self-isolating</p> <p>We now know much more about coronavirus (COVID-19) and so in future there will be far fewer children and young people advised to shield whenever community transmission rates are high. Therefore, the majority of pupils will be able to return to school. You should note however that:</p> <ul style="list-style-type: none"> • a small number of pupils will still be unable to attend in line with public health advice because they are self-isolating and have had symptoms or a positive test result themselves; or because they are a close contact of someone who has coronavirus (COVID-19) • shielding advice for all adults and children will pause on 1 August, subject to a continued decline in the rates of community transmission of coronavirus (COVID-19). This means that even the small number of pupils who will remain on the shielded patient list can also return to school, as can those who have family members who are shielding. Read the current advice on shielding • if rates of the disease rise in local areas, children (or family members) from that area, and that area only, will be advised to shield during the period where rates remain high and therefore they may be temporarily absent (see below). • some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to school (usually at their next planned clinical appointment). You can find more advice from the Royal College of Paediatrics and Child Health at COVID-19 - 'shielding' guidance for children and young people. <p>Where a pupil is unable to attend school because they are complying with clinical and/or public health advice,</p>	Yes	<p>Latest advice from government has been issued to parents.</p> <p>All parents informed of requirements inside school and informed if their child cannot or will not follow procedures put in place, we will discuss this with parents and actions taken. Pupil protocols have been issued to pupils and parents.</p>	L

	<p>we expect schools to be able to immediately offer them access to remote education.</p> <p>Where children are not able to attend school as parents are following clinical and/or public health advice, absence will not be penalised.</p> <p>All other pupils must attend school. If parents of pupils with significant risk factors are concerned, we recommend schools discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school.</p>			
Poor Psychological /Staff/Pupil Wellbeing – due to personal workload, returning to school issues etc	<ul style="list-style-type: none"> • Approach to wellbeing, mental health and resilience in place, including bereavement support • How staff are supported to follow this within their own situations and that of pupils and colleagues is clear <p>Covid-19-guidance-for-the-public-on-mental-health-and-wellbeing</p>	Yes	<ul style="list-style-type: none"> • Mental health champions appointed before Covid-19. All staff are aware of MHC. • Staff given regular updates and emails sent stating SLT and MHC are always available to speak to. • MHC – available for staff and pupils 	L
Spread of virus during Science, D&T and Food Tech lessons	<p>Schools to follow CLEAPSS (Consortium of Local Education Authorities for the Provision of Science Services) COVID-19 (Coronavirus) in Schools -</p> <p>Primary schools should refer to the primary website for their guidance.</p>	Yes		L
ASSESSED BY (Print name)		SIGNED		DATE
LINE MANAGER		SIGNED		REVIEW DATE