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GHF RISK ASSESSMENT – ANNOTATED FOR GLENBROOK PRIMARY SCHOOL		
Service/Person: Gipsy Hill Federation of Primary Schools	Assessment Team Members: Executive Headteacher, Headteachers	Assessment Review Dates: 1st April – updated in line with new government ‘Living with Covid’ plan (https://www.gov.uk/government/publications/covid-19-response-living-with-covid-19)
Area Assessed: Mitigation measures for safe opening of school in light of Covid-19	Name: Jane Scarsbrook Sign:	This will be reviewed in light of any changes to the national or local guidance or in response to specific outbreaks or new variants of concern
Date of Assessment: 1 April 2022	Name: Sign:	
School: Glenbrook Primary School	Name: Sign:	

This document outlines the arrangements for the full opening of all schools in the Gipsy Hill Federation. Each individual school adds site specific arrangements **where appropriate.**

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FURTHER INFORMATION:

This risk assessment should be used alongside the government guidance below:

<https://www.gov.uk/government/publications/covid-19-response-living-with-covid-19>

The following abbreviations are in use throughout this document:

- *GHF – Gipsy Hill Federation*
- *GB – Governing Body*
- *EHT – Executive Headteacher*
- *HoS – Head of School*
- *SENDCo – Special Educational Needs and Disability Co-ordinator*
- *CT – class teacher*
- *PO – premises officer*
- *FSO – Family Services Officer*
- *DSL – Designated Safeguarding Lead*
- *SAO – Senior Administrative Officer*
- *DHI – Deputy Headteacher for Inclusion*

Please note - when referring to staff, this will also include volunteers and trainee teachers.

		Recommended controls/Mitigation and Protective Measures	In place? Yes/No	By whom?	Additional notes
Sub sections		Key section: Awareness of and adherence to policies and procedures			
Awareness of and adherence		<ul style="list-style-type: none">• Health and Safety Policy has been updated in light of the COVID-19 advice	Yes	EHT/HoS	

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to policies and procedures		<ul style="list-style-type: none">• All staff, pupils and volunteers are aware of all relevant policies and procedures including, but not limited to, the following:<ul style="list-style-type: none">- Health and Safety Policy- First Aid Policy• All staff have regard to all relevant guidance and legislation including, but not limited to, the following:<ul style="list-style-type: none">- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013- The Health Protection (Notification) Regulations 2010- Public Health England (PHE) (2017) 'Health protection in schools and other childcare facilities'- DfE and PHE (2020) 'COVID-19: guidance for educational settings'• The relevant staff receive any necessary training that helps minimise the spread of infection.• The school keeps up-to-date with advice issued by, but not limited to, the following:<ul style="list-style-type: none">- DfE; NHS; Department of Health and Social Care; PHE, Lambeth and Southwark local authorities.• Staff are made aware of the school's infection control procedures in relation to coronavirus including access to Lateral Flow Device testing (see more details at the end of the risk assessment)• Parents are made aware of the school's infection control procedures in relation to coronavirus via text, letter and school website– they are informed that they must not send their child to school if they have <u>coronavirus (COVID-19) symptoms</u>, or have tested positive in the last 10 days. In these circumstances the parents/carers should call the			
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		<p>school to inform the school of this and that they will be following the national Stay at Home guidance. In all GHF schools this will be achieved through repeat texts and emails home, use of GHF website and school notice boards, where possible materials to be available in most commonly spoken languages in school community. Where there are concerns around compliance / understanding, FSOs/SLT will make direct contact.</p> <ul style="list-style-type: none"> • Pupils are made aware of the school’s infection control procedures in relation to coronavirus and are informed that they must tell a member of staff if they begin to feel unwell. In all GHF schools this is achieved through class teaching, circle times, virtual assemblies, adult re-enforcement and modelling. All to be repeated regularly, and reinforced through positive praise. • Staff and pupils are made aware of the process for removing face coverings when pupils and staff who use them arrive at school, and for staff during the school day, and this is communicated clearly to parents and staff. This is included in information about infection control procedures as described above, and is monitored by school staff at entry points to the school for pupils using face masks for travelling to school. • The Staff and Volunteer Confidentiality Policy and Pupil Confidentiality Policy are followed at all times – this includes withholding the names of staff, volunteers and pupils with either confirmed or suspected cases of coronavirus. 			
Sub sections		Key section: Prevention			
Minimise contact with individuals who are unwell		<ul style="list-style-type: none"> • Pupils, staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, or have tested positive in at least the last 10 days, and anyone 	Yes	HoS/SAO	

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with COVID-19 symptoms		<p>developing those symptoms during the school day is sent home. Signage at entry points to the school makes this clear. Staff are aware of the process and are reminded as needed. Parents are reminded through use of website, text, emails, signage and direct contact FSO / SLT as needed.</p> <ul style="list-style-type: none">• Any pupils or staff returning from abroad must follow government guidance regarding isolation periods/quarantine rules when travelling to the UK where/when appropriate• <u>If advised by local public health teams</u> in response to an outbreak, the school will promote and staff will be encouraged to engage with asymptomatic testing as advised. In case of a positive LFD test, public health advice regarding self-isolating will be followed.• <u>If advised by local public health teams</u> in response to an outbreak, details of asymptomatic testing available to families and household members of primary-aged children to be shared with all parents/carers. In case of a positive LFD test, public health advice regarding self-isolating will be followed.• If anyone in the school becomes unwell with Coronavirus symptoms they are sent home and advised to follow guidance.• School offices will maintain a log of isolation dates for pupils, with likely return dates. Pupils or school adults who are self-isolating for 10 days because someone in their household has tested positive will not be re-admitted to school earlier.• School offices will maintain a log of isolation dates for staff and will share this with GHF HR• Staff must supply isolation notes, medical certificates and any test results where applicable to the school office. These will be scanned and sent to GHF HR to retain in HR files.			
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		<ul style="list-style-type: none">• If a child is awaiting collection, they are moved, where 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. A window should be opened for ventilation. If it is not possible to isolate them, they are moved to a well-ventilated area which is at least 2 metres away from other people and where others have access to PPE. The isolation room at Glenbrook Primary School is the CPD room next to the main reception. In the event this room is in use or multiple children are waiting to be collected, the alternative area is the 'sensory' room on the top floor.• 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. The identified toilet at Glenbrook School is the adjacent toilet in the CPD room (for a small child Rec – Y3) or the adult toilet nearest the large hall for an older child or adult.• Everyone will 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 disinfectant after they have left to reduce the risk of passing the infection on to other people.• PPE will 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).• 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.			
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		<ul style="list-style-type: none">• 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 unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) and they have been requested to do so by NHS Test & Trace and are not fully vaccinated and are over 18 years and 6 months.• Any medication given to ease the unwell individual's symptoms, e.g. paracetamol, is administered in accordance with the Administration of Medicine on School Premises Policy• Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately.			
Good hand hygiene practice		<ul style="list-style-type: none">• 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.• Supervision of hand sanitiser use will take place due to risk around ingestion. Younger pupils and pupils with complex needs will continue to be helped to clean their hands properly.• The school will build hand washing routines into school culture, supported by behaviour expectations set out in the school Behaviour Policy.• Pupils arriving at school wearing a face covering are instructed not to touch the front of their face covering during use or when removing them. They immediately wash their hands on arrival, (or sanitise hands with alcohol based rub) dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they take home with them, and then wash their hands again (or	Yes	HoS/PO	

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		<p>sanitise hands with alcohol based rub) before heading to their classroom.</p> <ul style="list-style-type: none">• Sufficient handwashing facilities are available. Where a sink is not nearby, provide hand sanitisers in classrooms and other learning environments• The school maintains adequate stock of soap, hand sanitiser and paper towels. The PO is responsible for ensuring that supplies are topped up at the start of the school day and that dispensers are working properly. All staff are responsible for advising the PO / school office if stock appears to be running low at any point during the school day.• Lidded bins are provided for disposal of used paper towels etc, and will be emptied regularly as needed. All staff are responsible for alerting the PO if bins become too full at any point.			
Good respiratory hygiene		<ul style="list-style-type: none">• 'Catch it, bin it, kill it' approach continues to be very important, suitable number of tissues and lidded bins available in the school to support pupils and staff to follow this routine. Pupils are reminded frequently, and adults model correct behaviour.• The school keeps sufficient stock of tissues. All adults are responsible for alerting the school office if stock in any area appears to be running low.• Younger pupils and those with complex needs are helped to follow this guidance. Where appropriate, individual risk assessments for pupils with complex needs will be written in partnership with parents and the young person.• Risk assessments are used to identify pupils with complex needs who struggle to maintain good respiratory hygiene, for example those who spit uncontrollably or use saliva as a sensory stimulant.• The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage	Yes	HoS/SENDCo/CT	

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		good hand and respiratory hygiene, which staff in GHF schools will use as needed.			
Increased ventilation		<p>Good ventilation is important, and should be maximised wherever possible by opening windows, and propping open doors, as long as they are not fire doors, where it is safe to do so.</p> <p>Ventilation to ensure constant air flow throughout the day will be maintained in all shared spaces, including classrooms. Additional ventilation by fully opening windows and doors to create a draft over a sustained period of time will be created at all times where pupils are e.g. out to play/lunch. Relaxation around uniform/dress code rules are in place to support staff and pupils to be adequately dressed during the colder months.</p> <p>In Glenbrook school this is achieved by:-</p> <ul style="list-style-type: none">○ Ensuring all classroom windows and windows in common areas, toilets, offices and staff rooms are opened in the morning by the premises officer, or other designated member of staff○ To ensure site security at the end of the school day, Glenbrook has made the following arrangements to ensure windows are closed:<ul style="list-style-type: none">▪ PO/Class teachers to be responsible for ensuring classroom windows are shut▪ SLT, FSO, SENDCO and office staff responsible for ensuring office windows are shut.▪ Cleaning staff to check windows shut when carry out evening clean of the school▪ Regular reminders given to staff.	Yes	HoS, PO	

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		<ul style="list-style-type: none">• Staff have posters in class to help them use the in-built CO2 monitors to judge when to ventilate classrooms and to be able to maintain a comfortable temperature at the same time.			
Enhanced cleaning		<ul style="list-style-type: none">• Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with the infection control section of the Health and Safety Policy• Cleaners are employed by the school to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy.• Enhanced cleaning to be undertaken where required, and as requested by the HoS / PO – advice about enhanced cleaning protocols is sought from the local health team. Schools short of cleaning product supplies, should email DfE-CovidEnquiries.COMMERCIAL@education.gov.uk• The PO and HoS monitor the cleaning standards of school cleaning contractors and liaises with EHT to commission any additional measures required with regards to managing the spread of coronavirus.• The PO / HoS will carry out and log routine inspections and spot checks. However, ALL staff are expected to be mindful of the need for thorough cleaning and should immediately alert the HoS if they have any concerns.• Regular meetings with the cleaning contractors to monitor service provision will be held	Yes	HoS/ PO / CT/ support staff / extended services team	

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<p>Where there is high community transmission, outbreaks or a variant of concern, contact between staff / pupils and visitors will be minimised</p>		<ul style="list-style-type: none">• Contact between classes/year groups to be minimised wherever possible and where it will not have a detrimental impact on the educational provision for pupils. Levels of community transmission and any concerns regarding local variants will be taken into consideration when making decisions that impacts contact between classes/year groups.• Where there are concerns regarding outbreaks within the school or high levels of local community transmission, adults will be requested to avoid close face to face contact and minimise time spent within 1 metre of anyone.• Where there are concerns regarding outbreaks within the school or high levels of local community transmission, adults (staff and visitors unless exempt) will be requested to wear face coverings in the following situations: where social distancing between adults isn't possible; when moving around the schools; and when using communal areas including toilets, staff rooms etc. In the staff room, a communal area where use of face coverings may be reduced due to the consumption of food and drink, adherence to additional mitigation will be required: sticking to the maximum number of staff allowed in the staff room area at any one time, 2m+ social distancing, good levels of through ventilation.• Large inside gatherings such as whole school, whole key stage (in the larger schools) or large assemblies will be avoided and assemblies will be delivered in smaller groups or are held outside where possible where there are concerns regarding high levels of transmission within the school. Levels of community transmission and any concerns regarding local variants will be taken into consideration when making decisions that impacts contact between classes/year groups.	Yes	HoS / EHT / Extended Services Manager / DSL / CT	
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		<ul style="list-style-type: none">○ Where appropriate, if advised by local public health teams additional mitigation will be put in place. These might include:<ul style="list-style-type: none">○ Plan for lessons or activities which keeps movement around the school site to a minimum;○ Maximise the number of lessons or classroom activities which could take place outdoors;○ Break times (including lunch) staggered so that all pupils are not moving around the school at the same time;○ Drop-off and collection times staggered and communicated to parents;⊖ Use of staff rooms has limited occupancy○ Use of offices considered to support social distancing and additional mitigations are in place such as perspex screens.● Opportunities for parents to engage in key events communicated on an event-by-event basis● Minimise on-site visitors and ensure that there is a clear educational, safeguarding or welfare purpose to any visit. Any visitor coming on site where additional mitigations are in place must be agreed by the headteacher.● Ensure staff meetings and staff briefings allow for appropriate distancing and mitigation. Virtual platforms can continue to be used in case of outbreaks, high community transmission levels and where wider access is needed and therefore appropriate mitigation measures cannot be achieved.● Key contractors (catering, cleaning and wraparound care provision) are made fully aware of the school's risk assessment by the PO / HoS / Extended Services Manager.			
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		<p>Their risk assessments are also shared with and agreed by the school.</p> <ul style="list-style-type: none">• Visitors to the site, such as contractors, local authority employees and health employees to be fully briefed on the school's arrangements and follow site guidance			
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Use of PPE		<ul style="list-style-type: none">• The majority of staff in education settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:<ul style="list-style-type: none">○ where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained○ where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used○ Individual risk assessments to be put in place for children with intimate care or medical needs that require the use of PPE. These will be written and shared with parents and the young person.	Yes	HoS / SENDCo	
Sub sections		Key section: Response to Infection			
Test and trace		<ul style="list-style-type: none">• NHS Test and Trace process to be followed and contact will be made with local Public Health England health protection team as per the most up-to-date guidance from the local team and the London Coronavirus Response Cell (LCRC). Staff members and parents/carers understand that they will need to be ready and willing to:<ul style="list-style-type: none">○ <u>book a test</u> if they are displaying symptoms or if they have had a positive LFD test result (or two void LFD tests). Staff and pupils must not come into the school if they have symptoms or have had had a positive LFD test result (or two void LFD tests), and must be sent home to self-isolate if they develop them in school. A positive LFD test (or two voids) leads to: a) staff member and their household (if they are not fully vaccinated and are over 18 years and 6 months) isolating; b) close contacts	Yes	HoS	

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		<p>who have not been fully vaccinated and are over 18 years and 6 months self-isolate including anyone who has been in close contact in the period starting 48 hours before positive LFD test. Staff member with positive LFD test books PCR. If PCR test = negative, close contacts and member of staff can stop self-isolation.</p> <ul style="list-style-type: none">○ All pupils 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 with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test & Trace○ <u>self-isolate</u> if they have been in close contact with someone who tests positive for coronavirus (COVID-19) or if anyone in their household develops symptoms of coronavirus (COVID-19) if they are not fully vaccinated and are over 18 years and 6 months● A small number of home testing kits available to be given directly to parents/carers collecting a child who has developed symptoms at school or staff who have developed symptoms at schools, where providing a test will increase the likelihood of them getting tested.● Staff are required to book the first possible test that they can access and inform their Head of School of the result as soon as they receive it.● Parent code of conduct states that parents must access a test for their child if their child develops symptoms for coronavirus (Covid-19) and inform the school immediately once they have received the result.● The school will ask parents and staff to inform them immediately of the result of the test:			
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		<ul style="list-style-type: none">○ If someone tests negative, if they feel well and no longer have fever they can stop self-isolating. They may have another virus, such as a cold or flu, in which case it is still best to avoid contact with others until they feel better. Where other members of the household were self-isolating, they can stop self isolating.○ If someone tests positive they should follow the <u>'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'</u> 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 develop symptoms after they test positive, the 10 day isolation period starts from the day that they develop symptoms, not from the day of the test. If they 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 10 days if they are not fully vaccinated and are over 18 years and 6 months.● All GHF sites will ensure that this advice is regularly given to parents via newsletters, website etc. Whenever possible, the advice will be translated into the languages of the school community, or a text message sent in their own language urging them to seek assistance from a trusted member of their community to assist with translation.● Please note negative LFD tests do <u>not</u> mean that anyone instructed to self-isolate no longer needs to isolate. The full 10-day isolation period must be completed.			
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Sub sections	Key section: Safeguarding				
The lack of availability of Designated Safeguarding Leads may put children's safety at risk		<ul style="list-style-type: none"> Designated Safeguarding Lead training for all existing DSLs was renewed June/July 2020 Additional members of staff (middle leaders) attended designated safeguarding lead training in June/July 2020 so as to build capacity across the team 	Yes	EHT / HoS	
Increase in welfare concerns linked to additional stresses on families during this crisis, including significant hardship		<ul style="list-style-type: none"> Where staffing allows, increase capacity within the pastoral team to support families Adjustments to be made to the role of Designated Safeguarding Lead to support the predicted increase in workload. Working in partnership with LA to signpost parents to appropriate support Working in partnership with local organisations to provide support to families and, where possible, accessing resource for families. All DSLs accessed mental health and safety planning training to be better equipped to support vulnerable pupils and families 	Yes	EHT / HoS / DSL / SENDCo	
Supporting provision for children who are dual registered		<ul style="list-style-type: none"> Work in partnership with parent, child/young person and the alternative provision to complete individual risk assessments 	Yes	HoS / DSL / SENDCo	
Where there is an outbreak and additional mitigation of staggered start and end times to		<ul style="list-style-type: none"> Set up protocols with all staff to ensure that gates are only open when staff are present and when children are actively being dropped off or picked up from school whilst being supervised by adults Parents to be informed of the above protocols 	Yes	HoS	

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<p>the day are requested, the gates will be open for a significant period of time both at the start and end of the day.</p>					
<p>Sub sections</p>		<p>Key section n: First Aid and meeting the needs of children with medical conditions/intimate care needs</p>			
<p>The lack of availability of designated First Aiders may put children's safety at risk</p>		<ul style="list-style-type: none"> • Existing support staff have completed emergency first aid refresher course on line. • Updated paediatric training. • Named first aiders on display around the building. 	<p>Yes</p>	<p>HoS / DHT / SENDCo</p>	
<p>Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier when administering first aid of having to provide additional adult support</p>		<ul style="list-style-type: none"> ▪ Where face-to-face contact is essential, this should be kept to 15 minutes or less whenever possible, contact should be side by side, or with adult standing behind child. Adult should maintain height difference, and not interact with children by kneeling or crouching below the child's face level • PPE has been provided in cases where first aid needs to be administered involving close face-to-face contact - glove, aprons, face mask, face shield/eye protection (where appropriate). • Gloves, aprons, face masks are located in each classroom. Goggles are located in key areas in the building in case of serious injury where first aid needs to be administered for a prolonged period of time. • Where appropriate, older children may be asked by the member of staff to wear a face mask when first aid is being administered/intimate care is being provided for a 	<p>Yes</p>	<p>HoS / DHT / SENDCo</p>	

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		<p>prolonged period of time so as to further reduce risk of transmission.</p> <ul style="list-style-type: none"> • Staff to follow first aid procedures when administering first aid to pupils or staff 			
<p>Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier providing intimate care</p> <p>Emotional impact on child receiving intimate care due to use of ppe by member of staff</p>		<ul style="list-style-type: none"> • Staff to take above points for administration of first aid into consideration. • Individual Intimate care plan put in place in partnership with the parents and young person. Intimate care plan to detail which ppe is needed in order ensure safe procedures with a clear rationale for its use and purpose. • PPE provided directly to all members of staff named on the intimate care plan specific for the delivery of the intimate care plan • Pupil who has an intimate care plan in place to be supported to understand the use of ppe through e.g. visuals and familiarise themselves with the ppe (e.g. a set to play with themselves) 	Yes	HoS / DHT / SENDCo	
<p>Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier when administering medication</p> <p>Emotional impact on child</p>		<ul style="list-style-type: none"> • Staff to take above points for administration of first aid into consideration. • Wherever possible, children to be supported and supervised to administer their own medication e.g. asthma pumps. • Where staff have to administer medication to consider how they position themselves and ensure good handwashing hygiene before and after administration of medication. 	Yes	HoS / DHT / SENDCo	

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<p>when medication is being administered due to use of ppe by member of staff</p>		<ul style="list-style-type: none"> • Additional advice to be outlined on staff room medical boards regarding the safe administration of common medication, such as asthma pumps. • Where individual medical care plans are in place and where needed, amendments are made to reflect increased safety controls needed. • Where appropriate, individual medical care plans to detail which ppe is needed in order ensure safe procedures with a clear rationale for its use and purpose. • PPE provided directly to all members of staff named on medical care plan specific to the delivery of the intimate care plan • Pupil who has a medical care plan in place to be supported to understand the use of ppe through e.g. visuals and familiarise themselves with the ppe (e.g. a set to play with themselves) • Where appropriate, older children to be provided with a face mask to wear whilst medication is being administered 			
<p>Sub sections</p>		<p>Key section: Educational visits</p>			
		<ul style="list-style-type: none"> • Domestic educational visits can now be organised within class groups/year groups. Any educational visit must be first agreed by the headteacher and fully risk assessed in line with national guidance for the mitigation against Covid in addition to the usual school protocol. 			
		<p>Please note: this section is now only relevant where the school has been advised to encourage staff/pupils to take LFD tests in response to an outbreak by the local public health team.</p> <p>Key section: Lateral flow device testing</p>			

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<p>Failure to engage staff in the LFD testing programme – poor participation may result in increasing transmission</p>		<p>-School promotes the use of Lateral Flow (LFT) test kits with staff by providing information and training and support e.g. NHS training video, the correct How-to Self-Test guide etc. - All employees are encouraged to participate - LFD tests are approved by the MHRA for the purpose of staff testing</p>	<p>Yes</p>	<p>HoS</p>	
<p>Failure to manage test kits on school premises</p> <p>Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing resulting in</p> <ul style="list-style-type: none"> • false or inaccurate results • reduced testing capacity • Transmission of COVID-19 injury to users 		<p>- Non delivery of test kit supplies is immediately referred to DfE helpline - replacement LFT kits are ordered in a timely manner - Supplies of LFT test kits are securely stored between 2 and 30 degrees C - Participants are made aware of who is co-ordinating and monitoring home testing activity (the SAO). Incidents whilst using kits are reported to this person. - Collection times for test kits are staggered to avoid crowding and to maintain social distancing requirements. Face coverings worn - Test Kit Log is used to record lot numbers and confirms issue of correct instructions - Participants collecting test kits sign the Test Kit Log to confirm receipt and are advised how to report their test result - Scheduling of testing is organised to meet operational requirements</p>	<p>Yes</p>	<p>HoS</p>	
<p>Failure to obtain consent from</p>		<p>- Participation in home testing is voluntary and by consent. Those staff unwilling to take home tests and who do not display symptoms can attend school.</p>	<p>Yes</p>	<p>HoS</p>	

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those being tested School and employees Failure to follow agreed Standard Operating Procedures and breach of data protection protocols		- Participants are advised of how the test data will be used and have received a copy of the privacy notice			
Persons displaying Covid symptoms or who has contact with someone with symptoms attends the school site to collect LTF test kit. School population may be harmed by transmission of the virus leading to ill health or potential death		-Participants should not attend school to collect test kits if: - they have any symptoms of COVID 19, or - live with someone who is showing symptoms of COVID 19 if they are not fully vaccinated and are over 18 years and 6 months, or - if they have been advised to self-isolate with a household member, or - have ongoing contact with someone who has received a positive test if they are not fully vaccinated and are over 18 years and 6 months.	Yes	HoS	
Inappropriate storage and disposal of test kits		Workplace – Home test kits once received must be stored inline with guidance provided in a secure location and records kept on distribution to employees.	Yes	HoS	

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<p>Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing</p>		<p>Employees Home Test kits are stored out of reach of children, other vulnerable individuals and pets</p> <ul style="list-style-type: none">- Test kits are stored at room temperature or in a cool dry place (2-30 degrees C)- Test kits must not be stored in a fridge or freezer or left in direct sunlight- If the kit has been stored in a cool area (less than 15 degrees C) it has been at room temperature for 30 minutes (15-30 degrees C) before it is used by the participant.- All items of the test kit are placed in the waste bag on completion of the test. This is placed in the domestic refuse- Any spillages of test solution are absorbed by wiping with a paper towel or tissue. This is placed in the waste bag- The participant washes their hands before & after testing, and cleans surfaces used for testing			
<p>Difficulty with carrying out throat and mid-turbinate nasal swab or contamination of swabs</p> <p>Participant Failure to use swab correctly may jeopardise the validity of testing and cause injury or discomfort</p>		<p>-- Participants must not eat or drink for 30 minutes prior to the test</p> <ul style="list-style-type: none">- Any damaged swab/test packaging is not used and its non-use reported.- Participants do not re-use any of used/damaged test kits- The participant has discarded the original instructions in the box- Separate revised instructions have been provided to participants with the box of LFT swabs. This provides guidance and illustrations on how to use the swab in throat and nose- Participants must have been shown a training video showing them how to self-swab and must consistently follow the instructions- Participant has available clean flat surface for using test kit and a timing mechanism available- Participant must wash or sanitise hands, use a tissue, and wash or sanitise hands again before opening swab packet	<p>Yes</p>	<p>HoS</p>	

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		<ul style="list-style-type: none">- Participants are required to swab both tonsils (or where they would have been) x 4 and the nostrils alongside the lining of the nose- Participant to report any incident with the testing kit or personal injury to the schools.			
Use of test solutions when processing test kit. Contains the following components: NA ₂ HPO ₄ (disodium hydrogen phosphate), NaH ₂ PO ₄ (sodium phosphate monobasic), NaCl (Sodium Chloride) Participant could be harmed by inappropriate use of chemicals		<ul style="list-style-type: none">- Chemical components are not classified as hazardous for use as designed.- Participants should keep test kits out of the reach of children, vulnerable adults and pets when stored at home- Participant should not use test solution if use by date has expired- COSHH assessment for testing solution is available in school	Yes	HoS	
Participants have an allergy – participant may suffer an allergic reaction		<ul style="list-style-type: none">- the swabs in the Innova SARS-CoV-2 Antigen Rapid Qualitative Test kit are latex free- participant to report any allergic reaction to the as a yellow card incident to the MHRA and to the school	Yes	HoS	
Failure to manage personal samples and to interpret coding		<ul style="list-style-type: none">- Lateral Flow device is only for use by person they have been issued to and they should not use the test kit on family members etc.- LTF test kit is single use only	Yes	HoS	

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<p>Failure to follow agreed Standard Operating Procedures – for processing the sample at home may jeopardise the validity of testing</p>		<ul style="list-style-type: none">- swab contents are processed in accordance with training video and written instructions- All the extraction fluid must be used- All the liquid from the swab tip should be squeezed into the extraction tube- Participants must allow 30 minutes for sample to register results.- Participants are made aware that even a faint line against the T on the slide indicates a positive sample- If sample is void another LTF test is carried out-			
<p>Failure to respond to a Positive Test for COVID 19</p> <p>Other occupants of the school or home environment could be exposed to could be exposed to COVID19 virus</p>		<ul style="list-style-type: none">- participant should inform the school of a positive test so cover can be provided- Participant must follow national isolation guidance with their household- The school updates their Covid register if there is a positive Covid result and seeks advice from Local Outbreak Control Team regarding isolation of other contacts where appropriate	Yes	HoS	
<p>Failure by participant to report incidents or concerns about home testing or LTF kits</p> <p>Failure to manage could impact the</p>		<ul style="list-style-type: none">- Participants are advised to report any concerns/incidents with the test kit to the school. E.g. damaged kit, multiple void tests, unclear results, inability to record results to the school and by telephoning 119- Incidents requiring medical care should be reported by contacting 111 or 999- clinical incidents with the potential for harm e.g. a swab breaking in the mouth, or an allergic reaction is reported by the participant as a yellow card concern to the MHRA	Yes	HoS	

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quality or safety of testing					
Failure by school to report incidents or concerns about home testing or LTF kits Failure to manage could impact the quality or safety of testing		- Concerns raised by individual participants are recorded and responded to - Repeated incidents or patterns of concern are reported to the DfE helpline	Yes	HoS	

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