



**City Learning Trust**

Inspiring Outstanding Achievement

# **Covid 19 Secure Strategic Risk Register ACADEMY SITES**

*JANUARY 2021* (V20: 04/01/21)

*United by our values, we place children and  
young people first in everything we do*

# Introduction to CLT Covid 19 Secure risk management from JANUARY 2021

---

This V20 risk register replaces all prior versions and should be read in conjunction with, and aligned to the Government updated guidance for full school opening September 2020, and all subsequent Government updates related to Covid 19 risk management in education settings, local action levels and education tiers guidance:

**Please note that, as COVID-19 is a rapidly evolving situation, guidance may change with little notice. Updated versions of the strategy will therefore be numbered and dated.**

1. <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

**Note: To ensure ongoing review and update of this risk management document**

1. **DAILY ACTIVE MONITORING ACROSS ALL SITES IS A PRIORITY. (COVID 19/STANDARD H&S CHECKS)**
2. **DAILY ACTIVE MONITORING OF GOVERNMENT UPDATE GUIDANCE IS A PRIORITY.**
3. **THIS RISK REGISTER MUST BE REVIEWED AT ACADEMY/SITE LEVEL AND WHERE ADDITIONAL, SITE SPECIFIC, RISKS ARE IDENTIFIED, THIS MUST BE RECORDED THROUGH ADDING ADDITIONAL LINES AND MITIGATION FOR EACH RISK AREA.**
4. **PRE- SEPTEMBER: COMPLETION OF THE STRATEGY IMPLEMENTATION CHECKLIST AND THE WIDER OPENING CHECKLIST WAS UNDERTAKEN AND SUBMITTED TO M. FAICHNEY.**
5. **FROM SEPTEMBER: COVID 19 SECURE AND STANDARD H&S ACTIVE MONITORING CHECKLISTS, ARE COMPLETED AND SUBMITTED WEEKLY.**

## City Learning Trust Sites:

- o Central Team Offices – The Old Town Hall
- o Haywood Academy site
- o Haywood - City College BSOA site
- o Mill Hill Primary Academy site
- o Smallthorne Primary Academy site
- o Trentham Academy site

Risk is the threat that something, an event or action, will adversely affect the Trust's ability to meet compliance objectives. Risk management is the process by which such risks are identified, their severity assessed and cost effective actions are taken to address, or mitigate against them, to bring them down to acceptable levels.

Covid 19 Secure Risk management is consistent with:

- creating a culture of risk awareness throughout the organisation
- adopting an active, pro-active focused and proportionate approach, to ensure that the putting in place and maintaining of controls and contingency plans are appropriate and highly effectively in swiftly addressing risks to health, the likelihood of a risk happening and the potential impact if it does
- increasing, rather than reducing, innovation in response
- compliance with public health and government guidance, laws and regulations

## Process:

There are four fundamental stages to the risk management process:

1. Identifying risks: having a process for identifying the risks that face the Trust
2. Assessing risks: assessing the probability and impact of those risks enabling management action to be prioritised
3. Addressing risks: putting in control measures to reduce risk.
4. Monitoring risks: pro-actively managing the risks and ensuring risks are regularly reviewed and mitigation is updated as needed.

Risk management is an inclusive process as it is the staff who best understand the risks the organisation faces and they will be key to the management of those risks. Feedback from the staff through the Central Team and Academy sites structure will help with the risk identification and mitigation. The responsibility for assessing, addressing and monitoring the risks will lie with the Executive (ELG), Senior Leadership Team (SLG) and the HR Director. The Risk Register will be reviewed in detail through Audit & Risk procedures.

## Levels of risk:

A current rating is given on the Red/Amber/Green (RAG) rating system based on the level of overall risk. Level of risk is identified by the potential impact and the likelihood of occurrence. Both are allocated a 5-point scale where 5 is the highest risk and 1 the lowest risk. The two factors are then multiplied together to give an overall rating. Where the level of risk has changed since the register was last reviewed, the previous number is indicated in brackets.

The RAG rating is assigned as follows:

Score:	Colour:
1-6	
7-8	
9-12	
13-19	
20-25	

Risk Status Key:	
Code:	Meaning:
Inc	Increasing
Stable	Static, no change
Dec	Decreasing

\* Numbers in brackets refer to level of risk as of previous review and indicate whether the level has gone up or down. If there are no numbers in brackets, the level risk has not changed.

## Strategy Contents

<b>Section</b>	<b>Area</b>	<b>Pages</b>
<b>1. Transmission</b>	<b>A: Infection Control</b>	<b>5-6</b>
	<b>B: PPE</b>	<b>7</b>
	<b>C: Shielding/Clinically Vulnerable</b>	<b>8-9</b>
	<b>D: Illness/Suspected Cases</b>	<b>10-12</b>
<b>2. Operations</b>	<b>E: Group sizes/Academy Staffing</b>	<b>13</b>
	<b>F: Additional Staffing/Cross site Working/Visitors to site.</b>	<b>14</b>
	<b>G: Environment/Shared Spaces/Resources</b>	<b>15-16</b>
	<b>H:Playgrounds/use of playground equipment</b>	<b>17-19</b>
	<b>I: Education Provision</b>	<b>20</b>
	<b>J: Extended Provision/Enrichment</b>	<b>21</b>
	<b>K: Catch up/Additional Interventions and support</b>	<b>22</b>
	<b>L: Managing Complex Cases</b>	<b>23</b>
	<b>M: Transport</b>	<b>24-25</b>
	<b>N: Cleaning and Waste</b>	<b>26</b>
	<b>O: Catering</b>	<b>27</b>
<b>3. Contingency</b>	<b>P: Contingency Framework and Remote Learning</b>	<b>28-30</b>
<b>4. Appendix 1</b>	<b>Links to key guidance</b>	<b>31-32</b>
<b>5. Appendix 2</b>	<b>September 2020: Government Guidance on how to wear a face covering.</b>	<b>32</b>
<b>6. Appendices 3 &amp;4</b>	<b>Templates for recording absences and illnesses</b>	<b>33-34</b>

## SECTION 1: TRANSMISSION

### A: EFFECTIVE INFECTION CONTROL

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
A1	Coronavirus spread within the site community through direct transmission causes high risk to the health and well-being of the community.	4	5	20	ELG/SLG	Site Principals OTH- MF AC/ ELG	Daily site monitoring. Weekly review Review/update in line with PHE guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<ul style="list-style-type: none"> <li>Social distancing protocol in operation on all sites and shared with all staff. ('no requirement' – primary pupils. 1m+ secondary pupils. Staff 2m from students 'where possible.' Staff advised to ensure they follow guidance on time with each student - 15 minutes maximum).</li> <li>Reduced contact in place through measures regarding: Grouping children together, avoiding contact between groups, arranging classrooms with forward facing desks, staff maintaining distance from pupils and other staff as much as possible.</li> <li>System in place to ensure any member of staff or student stays at home if unwell.</li> <li>Uniform can be worn and is recommended.</li> </ul>							
<p>Covid 19 secure <b>Prevention</b> infection controls 1- 8, below are embedded in risk assessments and will be embedded into practice on all sites. This will be achieved through briefings to staff, staff ensuring that children know and understand the hygiene and social distancing protocols and through posters/information points around the site.</p> <ol style="list-style-type: none"> <li><b>minimising contact with individuals who are unwell by ensuring that those who have coronavirus symptoms, or who have someone in their household who does, do not attend school.</b></li> <li><b>Where recommended, use of face coverings in school.</b></li> <li><b>Clean hands thoroughly, more often than usual. Wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered</b></li> <li><b>Ensure good respiratory hygiene system in place by promoting the 'catch it, bin it, kill it' approach.</b></li> <li><b>Introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents. (See section E)</b></li> <li><b>Minimise contact between individuals and maintain social distancing wherever possible.</b></li> <li><b>Where necessary, wear appropriate personal, protective equipment (PPE). (See section B)</b></li> <li><b>Always keeping occupied spaces well ventilated.</b></li> </ol> <p>Numbers 1-5 and number 8, must be in place in all schools, all the time. <b>Number 6</b> must be properly considered and schools must put in place measures that suit their particular circumstances. <b>Number 7</b> applies in specific circumstances.</p> <p><b>Response to any infection: (PLEASE ALSO SEE SECTION D OF THIS STRATEGY)</b></p>							

- 9. Engage with the NHS Test and Trace Process.
  - 10. Manage confirmed cases of Coronavirus (Covid 19) amongst the school community.
  - 11. Contain any out break by following local health protection team advice.
- Numbers 9-11 MUST be followed in every case where they are relevant.

- Stocks and supplies of soap and sanitizer on all sites, and in all toilets/handwashing zones will be monitored, procured and sustained at all times. Weekly submission of stock levels form part of active monitoring and standard weekly deliveries to each site will be established and reviewed weekly .
- Use of face coverings is in place, as needed, in communal areas and corridors for students and staff in secondary settings. Where local action level moves to ‘high’ or ‘very high’ this will be mandatory in our secondary academies, with the exception of any exemptions. For staff in our primary settings, and our central team, face coverings will be worn, as appropriate, in any situation where social distancing cannot be guaranteed. This includes for staff working across sites.
- Staff work with children to explain, embed and revisit frequently the social distancing protocol routines.
- Staff understand steps they must take if they become aware of a suspected case. Report information to the Principal immediately.
- Staff understand steps they must take if they become aware that they have had contact with a person who has tested positively for the virus.
- All staff are aware of the NHS test and Trace system and the academy leaders actively engage with this programme as needed, ***in all cases, informing HR and seeking HR advice and support as needed.***
- Implementation of Lateral Flow Testing (LFT)/Asymptomatic testing in secondary academies, designed to support effective Infection control and reduced transmission will follow all Government and Public Health England guidance and protocols and is subject to a separate Risk Assessment Strategy which will be published alongside this main CLT Covid 19 Risk Strategy.

Impact on risk through mitigation above	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections below.</li> </ul> <b>Current scientific guidance records lower risk by implementation of all protective factors guidance.</b>
	3	5	15 (Dec)	

## B: PERSONAL PROTECTIVE EQUIPMENT

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
B1	Misappropriation/mis-use of PPE or lack of identified, required PPE available to staff causes personal risk to health for members of the Trust community.	4	5	20	DCFO	MF/SB SBMs/DCFO	Daily site monitoring. Weekly review Review/update of PHE guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<ul style="list-style-type: none"> <li>All staff will receive clear information and updates as needed on protective factors <b>public health guidance</b> - requirement for, use of and training in effective use of PPE in education settings, as is clearly set out in: <a href="https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe">https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe</a></li> <li>Use of face coverings is in place, as needed, in communal areas and corridors for students and staff in secondary settings. Where local action level moves to 'high' or 'very high' this will be mandatory in our secondary academies, with the exception of any exemptions. For staff in our primary settings, and our central team, face coverings will be worn, as appropriate, in any situation where social distancing cannot be guaranteed. This includes for staff working across sites. <b>(Appendix 2)</b></li> <li>All staff will be provided with an information poster which outlines key steps to support effective use of PPE. <b>(Via Marie Faichney)</b></li> <li>Children/Students whose care <b>routinely already involves</b> the use of PPE due to their intimate care needs should continue to receive their care in the same way. <b>Prevention. Academy Leaders will complete risk assessments for any/all pupils this applies to,, ensure staff are fully advised/trained in use of PPE and procedures with individual children.</b></li> <li>Where a child, not already identified as being <i>routinely in need of intimate care</i>, requires changing or intimate care support, parents/carers will be contacted to attend and support as needed. Discussions will then take place with regard to any needs newly identified which may require a risk assessment and routine support procedure to be implemented.</li> <li>In the case of dealing with a child who is unwell, use of and procedures associated with PPE will be applied. <b>Prevention</b></li> <li>In the case of dealing with individuals requiring first aid treatment, use of and procedures associated with PPE will be applied. <b>Prevention</b></li> <li>Central Services procurement procedures will ensure use of local supply chains to obtain PPE. Where this is not possible, and there is un- met urgent need for PPE in order to operate safely, central services will approach the local authority resilience forum.</li> <li>Stock levels of all PPE will be monitored actively and weekly. Standard weekly deliveries to each site will be established and reviewed weekly.</li> <li>For secondary academies implementing Lateral Flow Testing (LFT) programmes, all PPE and equipment, training on use and monitoring of will be provided directly by the DfE/PHE.</li> </ul>							
<b>Impact on risk through mitigation above</b>		Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below. Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b></li> </ul>		
		1	5	5 (Dec)			

## C: SHIELDING/CLINICALLY VULNERABLE/LIVING WITH A PERSON IN THESE CATEGORIES

Risk No	Risk Name (briefly describe the risk) <b>NOTE: GUIDANCE MAY BE UPDATED. ONGOING REVIEW IS CRITICAL.</b>	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
C1	Staff and or children who are clinically extremely/ vulnerable, or living with a person in these categories are exposed to risks to their health, or risks that compromise family members' health, whilst attending work/education provision on the site.	3	5	15	HR SLG	HR Director ELG	Daily site monitoring (Principals). Daily report to HR Weekly review Review/update in line with PH guidance

**MITIGATION STRATEGIES: MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy. The government will write to individuals to inform them if they are advised to follow formal shielding and not attend the workplace.**

- Are staff who were classed as **shielding/extremely clinically vulnerable**, aware of updates made to guidance in December 2020? "Currently, clinically extremely vulnerable people in **Tier 4 areas** are advised to follow shielding advice. **No other areas are currently advised to shield.**"
1. if you live or work in an area where *formal shielding advice has been put in place, and you have received a new shielding notification informing you of this*, Government advice is that you do not go to work.
  2. In areas where formal shielding advice is not in place, you can go to work, if cannot work from home, as long as the business is COVID-safe. However, You should remain cautious as there is still a risk of severe illness if coronavirus is caught, so the advice is to stay at home where possible and, if going out, follow strict social distancing. This **remains at 2m** for staff in this category. Face coverings/shields must be worn unless there is an exemption criteria applied.

**Staff who fall into this category must inform HR, providing medical information as required. HR will provide ELG/SLG with list of these staff who will then be supported, via line managers, to return to work where appropriate with the relevant risk assessments being completed and where this is not possible to work from home. Where there is any case that working from home is not possible, or a colleague in this category indicates that they do not wish to work from home, HR MUST BE INFORMED. In the case where the local area moves to 'high' alert or 'very high alert' – risk assessments for staff who are classed as clinically vulnerable must be reviewed and re-visited by HR, who will advise on any additional mitigation needed, including with regard to working from home or taking on an alternative role/ changing working patterns temporarily. Staff in this category can also seek support and advice as required directly through HR.**

- If a member of staff is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can attend their education or childcare setting. Being clinically vulnerable means that they may be at higher risk of severe illness from coronavirus. Clinically vulnerable staff should continue to take particular care to minimise contact with others outside their household. ***Staff who fall into this category must inform HR. HR will provide support and advice as needed, on an individual basis and will ensure a risk assessment is completed which mitigates any risk identified.***
- RCOG published guidance is available for pregnant women, containing advice for women from 28 weeks gestation, or with underlying health conditions who may be at greater risk. <https://www.rcog.org.uk/globalassets/documents/guidelines/2020-07-24-coronavirus-covid-19-infection-in-pregnancy.pdf>
- Leaders and Governors are aware of emerging surveillance data regarding disparities in risk relating to age and sex, where people live, deprivation, ethnicity, people's occupation and care home residence' If a member of staff falls into one of these groups, they can attend their education or childcare setting. **Staff who fall into this category must inform HR. HR will provide support and advice as needed, on an individual basis, and will ensure a risk assessment is completed if required, which**

mitigates any risk identified.

**In the case where the local area moves to 'high' alert or 'very high alert' – risk assessments for staff who are classed as clinically vulnerable must be reviewed and re-visited by HR . who will advise on any additional mitigation needed. Staff in this category can also seek support and advice as required directly through HR.**

- Are staff who live with someone who is within the shielding/extremely clinically vulnerable category, aware of where advice on steps they should take is available? <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19> Has HR been made aware of staff who fall into this category? **HR will provide support and advice as needed, on an individual basis.** Have staff who fall into this category been offered support? Has a **risk assessment been undertaken** in cases as appropriate/if needed?
- Are children/parents of children who were classed as **shielding/extremely clinically vulnerable**, or **clinically vulnerable** aware of the guidance and recent updates from Government? <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>
- “Currently, clinically extremely vulnerable people in **Tier 4 areas** are advised to follow shielding advice. **No other areas are currently advised to shield.**”
- All academies should ensure they have a list of these children, through clear information sharing and communication with parents and medical professionals as needed. These children will then be supported with either attending schools with **additional risk assessment mitigation in place, or supported with effective remote learning at home, which will need to be monitored to ensure engagement with a curriculum in line with their peers.**
- Academy leaders will engage with parents, EWS, School Health Teams and medical professionals, social care teams as needed for any concerns relating to these pupils.
- The Director of SEND and Inclusion will support/advise Academy Principals as needed and will keep students’ risk assessments under review, including with regard to follow up with medical professionals regarding any students categorised as medically immunosuppressed.
- Any clinically extremely vulnerable children who are advised not to attend school, because the risk of exposure to the virus in our area is currently very high, will be supported through appropriate arrangements to be able to continue education at home.
- For any child or young person who lives in a household with someone who is extremely clinically vulnerable, has discussion taken place with parents with regard to steps advised in guidance: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>
- If a child or young person lives with someone who is clinically vulnerable, including those who are pregnant, they can attend their education or childcare setting. **All academies should ensure they have a list of these children, through clear information sharing and communication with parents These children will then be supported with hand hygiene, respiratory hygiene and social distancing measures in school.**

Impact on risk through mitigation above	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented.</li> <li>• Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>
	1	5	5 (Dec)	

## D: ILLNESS/SUSPECTED CASES AND CONFIRMED CASES

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
D1	A child or a member of staff is unwell on site, with possible symptoms of Covid 19	5	5	25	MF/SLG	ELG/MF (HR)	Daily site monitoring. Weekly review Review/update in line with PH guidance
D2	A case of Covid 19 is suspected or confirmed in the setting	5	5	25	MF/SLG	ELG/MF (HR)	
D3	A colleague is contacted as part of TEST AND TRACE	5	5	25	MF/SLG	ELG/MF (HR)	
D4	Lateral Flow Testing programmes indicate a positive result	5	5	25	SLG	ELG/MF (HR)	

**MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.**

### **A person is taken unwell on the site:**

- If anyone becomes unwell with a new, continuous cough or a high temperature, loss of sense of taste or smell in an education or childcare setting, they must be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus infection guidance. <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>
- 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 of the child and with appropriate adult supervision if required. **If it is not possible to isolate them, move them to an area, which is at least 2 metres away** from other people.
- Ideally, **a window should be opened** for ventilation.
- If they need to go to the bathroom while waiting to be collected, **they should use a separate bathroom if possible**. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else. PPE should 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). **A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn**
- In an emergency, **call 999 if they are seriously ill or injured or their life is at risk**. Do not visit the GP, pharmacy, urgent care centre or a hospital.
- If a member of staff has helped someone who was unwell with a new, continuous cough, high temperature, loss of sense of taste/smell, they do not need to go home unless they develop symptoms themselves, the symptomatic person themselves test positive or they are advised to do so via NHS Test and trace or Local PHE. **They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell.**
- Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people. See also the COVID-19: cleaning of non-healthcare settings guidance. <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings>

**ALL ACADEMIES: There is a suspected/confirmed case of coronavirus on the site.**

**ACADEMY/SITE LEADERS MUST:**

- 1. FOLLOW LOCAL PHE GUIDANCE IN REPORTING SUSPECTED CASES INTO THE AUTHORITY.** Report this matter immediately City Council's Covid Response Team who can advise on next steps: E mail [Tracecovid19@stoke.gov.uk](mailto:Tracecovid19@stoke.gov.uk) or phone 01782 231222.
- 2. For any CONFIRMED CASES: If you have a confirmed case of coronavirus (COVID-19) within your nursery, school or college - call DfE's existing helpline on 0800 046 8687.** Select the option for reporting a positive case. You will then be advised on actions you need to take. This line is open 8am – 6pm Mon-Fri and 10am – 6pm Sat and Sun. You will then also need to report the information into the Local team. E mail [Tracecovid19@stoke.gov.uk](mailto:Tracecovid19@stoke.gov.uk) or phone 01782 231222.
- 3. PLEASE THEN ENSURE YOU ADVISE S. BATES/M. FAICHNEY –** who will support with any additional follow up you have been advised to take regarding notifying Public Health England Telephone 0344 225 3560 (opt 0, 2) or online at <https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I> and/or RIDDOR - reporting guidance <https://www.hse.gov.uk/news/riddor-reporting-coronavirus.htm>

**PRIMARY ACADEMIES**

**(AND SECONDARY ACADEMIES UNTIL LATERAL FLOW TESTING PROGRAMMES ARE UNDERWAY) Please note: For symptomatic persons, immediate self-isolation and arranging of a test through the NHS route remains the same. Lateral flow testing, once in place on sites, is for asymptomatic testing scenarios only.**

- When a child, young person or staff member develops symptoms compatible with coronavirus, **they should be sent home and advised to self-isolate for 10 days.** Their fellow household members should also self-isolate for 10 days. (Updated as of 14<sup>th</sup> December 20)
- All staff who are attending an education or childcare setting will have access to a test if they display symptoms of coronavirus, and are encouraged to get tested in this scenario. **Please contact Mare Faichney to arrange this.**
- All pupils who are attending an education or childcare setting will have access to a test if they display symptoms of coronavirus, and are encouraged to get tested in this scenario. **Please advise parents to contact: [www.nhs.uk/ask-for-a-coronavirus-test](http://www.nhs.uk/ask-for-a-coronavirus-test) or phone 119**
- Where the child, young person or staff member tests negative, they can return to their setting and the fellow household members can end self-isolation, as long as you are well.
- Where the child, young person or staff member tests positive, **academy leaders must advise the DfE helpline and the Council's Local PHE Covid response team (as above) who will guide them through the actions they need to take. If a parent advises the academy of a positive test, refer the parent to Stay at home guidance and follow point 2 above.**
- As part of the national test and trace programme, if other cases are detected within the cohort or in the wider setting, **The council's Local PHE Covid response Team will conduct a rapid investigation and will advise schools and other settings on the most appropriate action to take.** In some cases a larger number of other children, young people may be asked to self-isolate at home as a precautionary measure – perhaps the whole class, site or year group. Where settings are observing guidance on infection prevention and control, which will reduce risk of transmission, closure of the whole setting will not generally be necessary.
- It is recommended that schools keep a record of pupils and staff in each group, and any close contact that takes place between children and staff in different groups.
- Home tests provided to the school should only be offered to individuals in the exceptional circumstance where the individual has barriers to accessing testing elsewhere.

**SECONDARY ACADEMIES ONLY: ONCE LATERAL FLOW TESTING PROGRAMMES ARE UNDERWAY ON SITES:** Lateral flow testing (LFT) programmes will be made available in secondary academies, in line with DfE/PHE recommendations and students/parents/staff will be advised accordingly regarding the testing processes once available.

- When a child, young person or staff member develops symptoms compatible with coronavirus, **they should be sent home and advised to self-isolate for 10 days.** Their fellow household members should also self-isolate for 10 days.(Updated as of 14<sup>th</sup> December 20)
- Senior leaders should take steps to identify close contacts of the symptomatic person, *in readiness for if a positive case is confirmed.*
- When the child, young person or staff member tests negative, they no longer need to self-isolate, *as long as they are well/have no ongoing Covid 19 symptoms.* Household members can also end self-isolation in this context.

**Where the student or the member of staff of the academy then tests positive. – CLOSE CONTACTS**

- Household close contacts for either a student/member of staff testing positive, will need to move into self-isolation immediately for a 10 day period and organise testing through contacting NHS: [www.nhs.uk/ask-for-a-coronavirus-test](http://www.nhs.uk/ask-for-a-coronavirus-test) or phone 119
- For any close contacts identified (staff/students) within the academy, they must **either** then engage with daily LFT across a 7 day period, **or**, in cases where daily LFT is not consented to, must self-isolate for 10 days.

**A member of staff undertaking a PCR TEST arranged through the NHS – CLARIFICATION ON DIFFERENT SCENARIOS**

**GUIDANCE IS DIFFERENT DEPENDENT UPON WHETHER YOU HAVE GONE FOR TESTING BASED ON :**

**1) HAVING SYMPTOMS AND ARRANGING A TEST.**

- If a member of staff has symptoms, and goes for a test which **comes back negative** – they **no longer need to self isolate, as long as they are well/have no ongoing Covid 19 symptoms.**

**2) YOU HAVE BEEN SENT FOR/REQUIRED TO ATTEND FOR A TEST BASED ON SOMEONE YOU HAVE HAD CONTACT WITH TESTING POSITIVE:**

- If someone has tested positive and **named you as close contact colleague, as part of the test and trace follow up**, you will be contacted and required to undertake a test. **If the test is negative in THIS context**, you **must complete the 10 days self-isolation.**

**PLEASE CONTINUE TO ADVISE M FAICHNEY IN ALL CASES**

**A member of staff undertaking a Lateral flow Test on site (SECONDARY ACDEMIES ONLY)**

- If a member of staff undertakes a self-administered LFT on site at the academy (Secondary sites only) and it is **negative**, they can resume work as normal, undertaking repeat LFT as scheduled as part of the asymptomatic testing programme.
- If a member of staff undertakes a self-administered LFT on site at the academy (Secondary sites only) and it is **positive**, they, **and their immediate household** must **immediately self-isolate** and the colleague must arrange to go for a PCR Test. Information regarding close contacts of this colleague on the academy site should be obtained at this stage.
- If the PCR test is **negative**, they can return to work as normal but should then resume regular LFT repeat testing as part of the asymptomatic testing programme. Their immediate household can also end the self-isolation, unless otherwise directed by NHS Test and Trace.
- If the PCR test is positive, they must remain in self-isolation for the 10 day period as directed, and members of their household must also remain self-isolating.
- Close contacts in the academy identified for a member of staff testing positive through the LFT/PCR process above must either then engage with daily LFT across a 7 day period or, in cases where daily LFT is not consented to, must self-isolate for 10 days.

Impact on risk through mitigation <i>above alongside other protective factors mitigation, which contribute to a reduction of risk in this area.</i>	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>
	2	5	10	

## SECTION 2: ACADEMY OPERATIONS

### E: CLASS GROUPS/SIZES AND ACADEMY STAFFING

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
E1	Ability to maintain effective infection control and reduce transmission with full re-opening of schools.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG)
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<b>Student numbers and students needs information.</b>							
<ul style="list-style-type: none"> <li>Year group 'mega bubbles'/class bubbles been planned to best suit the individual academy, in line with govt./PHE guidance. Class sizes are limited to 30, where possible.</li> <li>Consideration has been given to measures within classrooms – Layout should be front facing, not circular groupings, unless a clear rationale for amending this relating to Early Years and infants. Distance measures between teacher/children are observed appropriately.</li> <li>Students will be supported as needed with information about and reminders regarding social distancing, hand hygiene and respiratory hygiene.</li> </ul>							
<b>Staffing and allocation of staffing to groups to minimise number of adults to pupil contact ratios.</b>							
<ul style="list-style-type: none"> <li>Planning has considered how to most effectively minimise cross over of staff between areas of the site and class/year group bubbles. This is revised as required relating to any local tier restrictions and guidance.</li> <li>Staff have been advised to retain 2m distancing from students in lessons, where possible, and use of face coverings/face shields is applied where this is not possible.</li> <li>Staff are clear about time with each student is limited to 15 minutes maximum within 2m and less than 1 minute within 1m and the need for face coverings/shields in these situations.</li> <li>Staff have been advised on the guidance regarding no requirement for face masks in lessons, and requirement for use of face coverings for students (secondary) and staff (all) in communal spaces and corridors where social distancing cannot be maintained.</li> <li>Staff classed as extremely clinically vulnerable/clinically vulnerable have mitigation risk assessments. This has been supported by and agreed with HR. In tier 4 restrictions/where clinically extremely vulnerable staff are advised to shield, HR work directly with staff to enable this.</li> <li>HR have been advised ref any staff for whom H&amp;S /Equalities and duties risk assessments may be needed. Set in place – or agreed as 'not required', as appropriate. Staff are aware of the need to review RA with HR if and when Local alert levels change to 'high' or 'very high'</li> <li>Staff have been made aware of the expectations around staff leave. Academy Principals have all information from staff regarding planned travel.</li> <li>Staff have been advised of all updates to strategy, associated operational changes and processes to access welfare support or raise any concerns.</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		
		1	5	5 (Dec)			

## F: ADDITIONAL STAFFING, CROSS SITE WORKING AND VISITORS TO SITE

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
F1	Ability to maintain effective infection control and reduce transmission with full re-opening of schools.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG) Update in line with PH guidance
<b>MITIGATION STRATEGIES:</b> Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy. <b>Where there is a confirmed case on site</b> – all agency staff/visitors and contractors will be advised as required. <b>Where the local area alert changes to 'high' or 'very high'</b> – a review of the footfall to sites will be undertaken and changes as appropriate made to protocols.							
<b>Agency and Peripatetic staff.</b>							
<ul style="list-style-type: none"> <li>Plans to minimise use of agency staff are in place. Where possible, contracts for longer periods are set.</li> <li>Agency staff are made fully aware of academy procedures and risk measures, and must comply with them at all times. Compliance of visiting staff is monitored, alongside substantive staff, as part of active monitoring.</li> <li>Where peripatetic staff attend sites, Covid 19 secure risk documentation between the Trust and providers are shared and reviewed to ensure agreed compliance.</li> <li>Where there are ITT colleagues on site/arrangements are in place which comply with Trust strategy. ITT staff are made fully aware of academy procedures and risk measures, and must comply with them at all times. Compliance of visiting staff is monitored, alongside substantive staff, as part of active monitoring.</li> <li>HR must be made aware of all recruitment needs, which will then be managed through HR recruitment protocols.</li> </ul>							
<b>Cross Site working</b>							
<ul style="list-style-type: none"> <li>Trust protocols are in place and have been shared across all teams. The Trust protocols for cross site working must be followed at all times and will form part of active monitoring. They are reviewed regularly as part of active monitoring and always in response to any change in govt. guidance/local tier restrictions.</li> </ul>							
<b>Contractors and suppliers</b>							
<ul style="list-style-type: none"> <li>Life cycle works and statutory H&amp;S related contract work must continue as scheduled. Where possible, contractors will visit outside of academy working day hours. All sites have submitted Operational information to Engie/Premises Officers.</li> <li>Outside of essential works, Trust protocols are in place and have been shared across all teams. The Trust protocols for visitors to site must be followed at all times.</li> </ul>							
<b>Visitors to site</b>							
<ul style="list-style-type: none"> <li>Trust protocols are in place and have been shared across all teams. The Trust protocols for visitors to site must be followed at all times. They are reviewed regularly as part of active monitoring and always in response to any change in govt. guidance/local tier restrictions..</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b>		
		1	5	5	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## G: ENVIRONMENT AND SHARED SPACES/RESOURCES

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
G1	Risk of reduced infection control due to ill-considered environment and shared space planning.	2	5	10	SLG MF/AC	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG) Review/update in line with PH guidance
<b>MITIGATION STRATEGIES: MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<ul style="list-style-type: none"> <li>Start/end of day times have been considered and separate entrances and exits designated, to ensure no large gatherings/ ensure bubbles are kept separate.</li> <li>The site has been zoned as is possible, to avoid cross over of bubbles.</li> <li>Designated outdoor spaces/playground areas have been allocated to each mega bubble/class.</li> <li>Plans are in place regarding access to/use of shared facilities such as the canteen/dining room/specialist teaching rooms</li> <li>Designated toilets for use have been planned to support minimising cross over/use.</li> <li>Desks/tables set to ensure all students face the same direction/no grouped seating, unless a clear rationale for amending this relating to Early Years and infants.</li> <li>Rotation of access to specialist teaching areas is being accommodated through timetable/weeks blocking and rotation, to minimise use by different groups daily.</li> <li>Orientation work focused on any changes regarding evacuation/emergency planning procedures is in place for staff/pupils.</li> <li>For key individual equipment, plans in place for individual sets.</li> <li>For shared resources, these are limited to bubbles, where possible and are plans in place for regular cleaning.</li> <li>For shared specialist resources, e.g. Music, D&amp;T, PE, Science equipment, plans are in place for frequent, thorough cleaning and timing of use. Between bubbles, (including classes if a single class is an identified bubble) equipment is cleaned and not used again for 48 hrs (72hrs for plastics). <b>(See also subject and CLEAPPS Risk assessments for more specific guidance on effective use of equipment by subject area.)</b></li> <li>Site checks and planned preventative maintenance works are undertaken daily to ensure H&amp;S requirements are supported in each zone.</li> <li>Review of any specific risk associated for zones, and completion of any associated, additional risk assessments/updates to emergency planning procedures is undertaken and reviewed regularly.</li> <li>Cleaning routines are effectively implemented throughout the day and daily, with additional cleaning on all sites established.</li> <li>Site cover in place to support the meeting of site needs/checks across all zones daily.</li> <li>Protocols are in place for access to the site by service providers, parents and carers, visitors and dual site staff to support infection control and avoid group 'gatherings'.</li> <li>Use of face coverings is in place, as needed, in communal areas and corridors for students and staff in secondary settings, staff in primary settings and visitors to sites.</li> <li>Parents have been made aware of the new arrangements and are updated with regard to any changes.</li> </ul>							

**Ventilation**

**Mechanical ventilation systems** – these should be adjusted to increase the ventilation rate wherever possible, and checked to confirm that normal operation meets current guidance (if possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply. **Please liaise with Sharon Bates regarding planned use of any mechanical ventilation systems.**

**Natural ventilation.**

- Doors are propped open, where safe to do so (bearing in mind fire safety and safeguarding), and windows are open to limit use of door handles and aid ventilation
- If necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)

**Winter Months:**

**To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures should also be used as appropriate on our sites:**

- Opening high level windows in preference to low level to reduce draughts
- Increasing the ventilation while spaces are unoccupied (e.g. between classes, during break and lunch, when a room is unused)
- Providing flexibility to allow additional, suitable indoor clothing. ‘Layering up’ Senior Leadership Group (SLG) to review uniform policy during the winter months, taking into account the need to avoid any extra financial pressure on parents. Advise parents accordingly of any changes to policy across Winter.
- Re-arranging furniture where possible to avoid direct drafts

**Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.**

**Estates**

Plans are in place to ensure all the usual pre-term, weekly and daily building checks are undertaken to make the school safe. (Please see wider opening checklist, life cycle and capital works schedules, PPM sheets and active monitoring checks) Wider opening active monitoring checklists and processes include:

- Consideration of the need for any additional resources on sites, e.g. waste bins/handwashing stations?
- Adequate ventilation being in place
- Restrictions in place regarding e.g. air conditioning units/hand dryers.

**Focus has been given to:** Covid specific plans alongside general legislation H&S strategy. Sharing of strategy with all parties. Monitoring, review and update procedures. Roles and responsibilities. Risk Assessments for specific areas/aspects. Consultation with staff. Processes for raising concerns/resolving issues.

Impact on risk through mitigation above	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>
	1	5	5	

## H: PLAYGROUNDS/USE OF PLAY EQUIPMENT

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
H1	Transmission of infection via hard surface play Equipment.	3	5	15	Site Teams Duty Staff	Principals	Active monitoring (Principals and SLT).
H2	Lack of infection control when using playground Equipment.	3	5	15	Site Teams Duty Staff	Principals	Active monitoring (Principals and SLT).
H3	Lack of consideration for the needs of individual children may use the equipment	3	5	15	Site Teams Duty Staff	Principals	Active monitoring (Principals and SLT).

**MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.**

### **Preparing a playground for re-opening.**

- Site leaders/Principals have ensured playground and/or exercise equipment is safe to use and that risks from damaged or defective equipment are addressed before opening.
- Consideration has been given to poor weather arrangements and discussed with Executive Team as required for identification of additional mitigation.

### **Infection Control: Hand hygiene: 'Hands, Face, Space'.**

- Hand sanitiser gel or wipes should be easily accessible to staff on duty, for children to clean their hands with.
- Encourage all users to wash/sanitise hands more often than usual, for 20 seconds using soap and water or approved gel and foam sanitiser, particularly at the beginning and end of play. Use disposable paper towels in handwashing facilities where possible
- Advise users not to touch their faces, and to cough or sneeze into a tissue or arm when a tissue is not available. 'Catch it, kill it, bin it.'
- Remind children not to put their mouths on equipment or their hands in their mouths
- When communicating safety messages, ensure those with hearing or vision impairments can access these messages. Consideration should also be given on how to assist those with disabilities with complying with the changes.

where practicable, provide hand sanitiser (automated where possible) or hand washing facilities at the entry and exit points

### **Infection Control: Use of face coverings: 'Hands, Face, Space'.**

- Use of face coverings is in place, as needed, and in line with government policy and guidance, in communal areas and corridors for students and staff in secondary settings, and staff in primary settings.

### **Infection Control: Social distancing: Hands, Face, Space'.**

- Promote and remind all users of the need for social distancing. Support this through effective number of equipment monitoring duty staff.

**Infection control: Food:**

- Consumption of food or drink on play equipment or in the playground area is banned

**If equipment is in an enclosed area:**

- An advisory limit on the maximum number of users able to use play equipment must be set, in line with current bubble group numbers. Signs must be available which communicate this maximum number.
- Where practicable, implement a booking system so that users can book a slot to use the equipment, supporting planned clean down in between use.

**Equipment:** - limit the number of users able to use a particular piece of equipment to minimise the transmission risk of COVID-19.

Potential measures include:

- Signs to communicate maximum number of users at one time
- Limit the available number of seats on equipment or numbers of swings available to promote social distancing.
- Set times equipment can be used and, if required, a time limit for use and use signs to communicate this to users.
- Use adjacent space for queues or waiting areas for users, using barriers, markings or signs where it is safe to do so.
- When implementing a queue or waiting area, consideration must be taken of its impact on the surrounding space and ensure it does not impede other users, particularly considering those with visual or hearing impairments, mobility problems and invisible disabilities
- Consider the introduction of a clearly marked one way system around the equipment, to help prevent users from coming into close contact with each other.
- Where equipment is less than 2 metres apart, pieces of equipment should be moved/closed off, to allow social distancing measures to be adhered to if possible. If not possible, 1 metre distance with risk mitigation is acceptable. The mitigations should be set out in the risk assessment. **(Add as specifically needed by site)**

**Cleaning: This should include establishing cleaning regimes for:**

- Playground equipment for children, usually up to age 14, such as slides monkey bars and climbing frames
- Semi enclosed playhouses or huts for small children
- Enclosed crawl through 'tunnels' or tube slides
- Exercise bars.
- Entry and exit points such as gates
- Seating areas such as benches and picnic tables
- Providing more waste facilities and more frequent rubbish collection.

**Considering children with additional needs:**

- Planning must take into account the requirements of children with additional needs, linked to individual children’s risk assessments.

**Issues that are likely to be specific to this group include:**

- An understanding that many need frequent reminders about rules of behaviour in playground settings
- Changes to familiar environments are likely to require longer periods of adjustment
- Children with physical and sensory disabilities may need assistance with moving from one place to the next
- Some children with additional needs such as autism find it difficult to adjust to changes and may need additional support/orientation.
- Some additional needs are not evident, such as hearing loss, and may therefore account for non-responsiveness to verbal instruction
- Queuing for apparatus can be a source of frustration, and the cause of agitation, and needs additional consideration for some children.
- Is there a higher risk of being involved in bullying incidents, which needs additional mitigation? **(Add as specifically needed by site)**

**Keeping staff safe:**

- By ensuring clear daily rotation of cleaning plans for playground equipment/surrounding areas
- By planning for managing queues of those waiting to use equipment
- By ensuring adequate numbers for stewarding equipment to ensure users comply with rules.
- If any individual risk assessment for a member of staff on duty or supporting a key pupil, shows that PPE is required, this should be provided and it must fit properly.

**It is important that employees use face coverings properly and wash their hands before putting them on and before and after taking them off. Academy leaders should support their staff in using face coverings safely. This means telling staff:**

- Wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on, and before and after removing it
- When wearing a face covering, avoid touching your face or face covering, as you could contaminate them with germs from your hands
- Change your face covering if it becomes damp or if you’ve touched it
- Continue to wash your hands regularly
- Change and wash your face covering daily
- If the material is washable, wash in line with manufacturer’s instructions. If it is not washable, dispose of it carefully in your residual ‘black bag’ waste. Do not put it in the recycling bin
- Practice social distancing wherever possible

Impact on risk through mitigation above	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>
	1	5	5 (Dec)	

# I: EDUCATION PROVISION

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
I1	Ability to provide a full curriculum offer which is broad and balanced and meets all learners needs.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG)
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<b>Attendance</b>							
Guidance from 4 <sup>th</sup> January 2021 for Tier 4 areas is that: <b>“Currently, clinically extremely vulnerable people in Tier 4 areas are advised to follow shielding advice.”</b> For other Local Tier Levels: <b>“ No other areas are currently advised to shield.”</b> Pupils are expected to attend school as normal. The Director of Inclusion and SEND will work with Academy leaders and inclusion teams, to support families as needed and to monitor, record and report attendance as required – engaging with the EWO and multi-agencies as required regarding concerns.							
<b>ON SITE CURRICULUM</b>							
A broad curriculum is planned for, focusing on priority aspects within stages/subjects, to close gaps/accelerate progress, rather than reduce curriculum offer.							
RHE becomes statutory Sep 20, and should be in evidence by summer 21. Plans are in place/underway to ensure this.							
Consideration has been given to staff moving across classes, (as allowed under new guidance) versus feasibility to have subject specialists assigned to each mega bubble.							
Timetabling has taken into consideration the linking of specialist rooms teaching into workings of bubbles. This has been set in place where possible, to reduce transmission.							
Due regard has been given to CLEAPSS guidance (PE/Science/D&T/Perf. Arts), to support how some subjects could be delivered most safely.							
Schools in local restriction tier 3 or 4: very high alert areas should not host performances with an audience. Consider alternatives such as live streaming and recording performances, subject to the usual safeguarding considerations and parental permission.							
Subject leaders have developed subject specific risk assessments as required, with particular emphasis on practical aspects of PE, D&T, Science, Music and Performing Arts. These risk assessments have been checked and approved by Line Managers/Senior Leaders.							
Timetable planning/environment requirements/facilitated blocked weeks for access to specialist teaching areas, have been considered to support reduction in movement/use of specialist space, reduction in potential transmission/fulfilling of breadth of curriculum offers.							
For PE – outdoor provision in place as much as possible and all contact sports are avoided. PE leaders update as required against subject association guidance							
<b>REMOTE CURRICULUM:</b>							
Plans and systems are in place to enable immediate move to a full remote learning curriculum in the case of a ‘local outbreak’ resulting in the academy being closed.							
Plans and systems are in place to provide remote learning, of a high quality which is in line with on-site curriculum learning, for any pupil absent due to isolation/medical needs.							
Information has been provided for all parents with regard to curriculum provision as needed.							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records lower risk by implementation of all protective factors guidance.		
		1	5	5			

## J: EXTENDED PROVISION AND ENRICHMENT

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
J1	Ability to provide a full enrichment curriculum offer To meet the needs of all learners.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG) Update in line with PH guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy. In the case of the Local Area going into 'High' or 'Very High' alert level additional actions will be set as required.</b>							
<b>Wrap around care/extended provision.</b>							
<ul style="list-style-type: none"> <li>Staff and parents have been made aware that this can resume and continue This includes under January 2021 Tier 4 restrictions.</li> <li>Internal staffing provision will follow all academy/Trust risk strategy protective measures in place and information will be available to parents regarding specific arrangements for drop off/collection and provision.</li> <li>Regarding external providers to our sites, a copy of their risk strategy will be held on site and centrally and checks will be undertaken to ensure that it fully complies with Trust arrangements. External providers will be required to provide our parents with/make available to parents, provider information on risk assessments/protective measures in place.</li> <li>Use of face coverings by secondary age students, in communal areas and corridors, where they are potentially mixing with peers outside of their usual bubbles, will be applied appropriately and in line with guidance.</li> </ul>							
<b>Alternative Provision</b>							
<ul style="list-style-type: none"> <li>Where pupils from the academy attend dual provision/alternative provision, this can continue under higher level tiers, Individual risk assessments will be undertaken to balance and safeguard the provision entitlement with mitigate risk of transmission cross sites/groups. Academy leaders must have keep up to date lists of pupils this involves, along with risk assessments.</li> </ul>							
<b>Off site visits.</b>							
<ul style="list-style-type: none"> <li>SLT/Visit co-ordinators understand that the only visits currently allowed are domestic and non-overnight visits. Local Tier guidance will be checked as part of all visit planning.</li> <li>SLT/Visit co-ordinators are clear on EVOLVE control measures and risk assessments, as updated around visits/latest guidance.</li> <li>Use of face coverings by secondary age students, on school transport, will be applied appropriately, and all transport guidance will also be checked and followed.</li> <li>Plans are in place to ensure that any planning of visits is directed for approval to the Principal, before any confirmation of visit is given, to external providers and/or parents and pupils.</li> </ul>							
<b>Contingency Communications</b>							
<ul style="list-style-type: none"> <li>If there is a confirmed case/outbreak on the site, information will be provided to all on site/off site providers as required, in line with actions required by Local PHE.</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b>		
		1	5	5	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## K: CATCH UP, ADDITIONAL INTERVENTION AND SUPPORT

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
K1	Ability to provide additional support to meet the needs of all learners.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG)
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<b>Catch up</b>							
<ul style="list-style-type: none"> <li>Plans were implemented to ensure all students were enabled to attend school for a 'Foot over the threshold' experience, prior to full return in September 20.</li> <li>ELG, DLG and SLG planning in place for initiation and implementation of focused learning interventions, supported by Government funding.</li> <li>Swift identification, monitoring and review is in place, of key individuals/groups for learning interventions required to enable home/academy support to close learning gaps.</li> </ul>							
<b>Well being</b>							
Consideration has been given to the provision of pastoral and extra-curricular activities to all pupils designed to: <ol style="list-style-type: none"> <li>support and maintain the rebuilding of friendships and social engagement.</li> <li>address and equip pupils to respond to issues linked to coronavirus (COVID-19).</li> <li>support pupils with approaches to improving their physical and mental wellbeing. (For resources and guidance, please see: <a href="https://www.minded.org.uk/">https://www.minded.org.uk/</a>)</li> </ol>							
<b>Behaviour</b>							
<ul style="list-style-type: none"> <li>Policies have been updated as needed to support the whole community and retain a focus on minimising exclusions.</li> <li>Particular focus is planned, with support from the Director of SEND and Inclusion for support for pupils impacted by adverse experiences, lack of routines, trauma, SEMH.</li> <li>Training requirements for staff to enable them to support behaviour needs in light of Covid 19 have been planned and implemented as needed. Further training will be offered through the Professional Growth Strategy programmes.</li> </ul>							
<b>Safeguarding</b>							
<ul style="list-style-type: none"> <li>Policies have been updated as needed, in light of additional factors around Covid 19 and the impact of this within and across the community.</li> </ul> Consideration has been given to the provision of additional staffing support with regard to: <ol style="list-style-type: none"> <li>Work with school health team - <a href="https://www.gov.uk/government/publications/healthy-child-programme-0-to-19-health-visitor-and-school-nurse-commissioning">https://www.gov.uk/government/publications/healthy-child-programme-0-to-19-health-visitor-and-school-nurse-commissioning</a></li> <li>support for resilience, mental health and wellbeing including anxiety, bereavement and sleep issues</li> <li>supporting vulnerable children and keeping children safe</li> <li>Planning and implementation of Lateral Flow Testing (LFT) programmes in secondary academies.</li> </ol>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b>		
		2	5	10	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## L: MANAGING COMPLEX NEEDS CASES

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
L1	Addressing vulnerabilities of children and young people with complex needs to ensure their health and that of staff working directly with them is not compromised .	3	5	15	SENCOs/ Inclusion Teams	Director of SEND	Review/update in line with Govt/Children’s Services and Social Care guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy. It is recognised that there are vulnerable groups who will be in need of additional support, to ensure that they know and understand risks, can follow new protocols and systems and be supported as needed to do so. This may include children with an EHCP, an identified medical need, a social care need and an emotional/behavioural need.</b>							
<ul style="list-style-type: none"> <li>Clinically extremely vulnerable students advised to shield will be fully supported to engage in learning at home/remote learning and support to them and their families will be directed through the Director of SEND and Inclusion working with Academy Principals and Inclusion Teams.</li> <li>Vulnerable groups children are expected to be in school and Academy leaders will work proactively with parents and families and multiagency partners to ensure this. Where there is a case for a child from these groups to remain at home, through an identified professional recommendation, or government advisory letter, multi-agency support will be in place to support the child and the family.</li> <li>A RAG rating system is in place between academies and the Local Authority to monitor where there are risks, in order to implement appropriate action. Under national lockdown, children’s services and social care provision will continue as they have been to protect&amp; support the most vulnerable/disadvantaged children/young people.</li> <li>Principals and the Director of SEND and Inclusion will support SENCOs in monitoring EHCP/SEND support pupils, and students with medical needs. Individual risk assessments will be in place to ensure full and appropriate monitoring and support for pupils with an EHCP and/or learning/medical need pending EHCP.</li> <li>Principals and Inclusion leads will work with Children’s Services, Social Care and the School Health Hub to carefully monitor and support children on a CP/CHN/Medical plan.</li> <li>Inclusion teams and identified link staff for each site will support children and families engaged in Early Help.</li> <li>Daily calls will be routinely in place for any pupils not attending school. Weekly calls and monitoring of engagement in learning will be in place for remote learning cases.</li> <li>Parents are aware of expectations regarding attendance and the academy team work with the EWO to address and resolve any attendance concerns.</li> <li>Risk assessments will be in place for behaviourally challenging/AP pupils returning to school to ensure protocols are followed and not compromised.</li> <li>Plans will be in place to ensure support assistance for students with identified needs to engage in Lateral Flow Testing programmes where consent is given for them to engage.</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b>		
		1	5	5 (Dec)	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## M: TRANSPORT

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
M1	Ability to reduce transmission of infection, through Use of public/school transport.	3	5	15	SLG	ELG	Daily site monitoring (Principals). Weekly review (SLG/ELG) Update in line with PH guidance

**MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.**

### **Dedicated School Transport**

Where any academy students are identified as travelling on dedicated school transport, leaders will verify with the provider that govt. recommendations are followed as below:

- Social distancing should be maximised within vehicles
- Children either sit with their 'bubble' on school transport, or with the same constant group of children each day
- Children should clean their hands before boarding transport and again on disembarking
- Additional cleaning of vehicles is put in place
- Organised queuing and boarding is put in place
- Through ventilation, fresh air (from outside the vehicle) is maximised, particularly through opening windows and ceiling vents

**Children must not board home to school transport if they, or a member of their household, has symptoms of coronavirus (COVID-19).**

### **Public transport.**

- Academy leaders will organise to survey parents to ascertain numbers who travel on public transport.
- Where numbers suggest high % of travel on public transport, the academy will liaise with the Local Authority regarding additional measures recommended by the Dept. of Transport/LA for the local area.
- Consideration will be given to any associated decisions regarding staggering of start/end times which will support reducing pinch points in use of public transport.

### **Academy/Trust transport.**

- Planning will focus on how pupils are grouped together on transport, (where possible this should reflect the bubbles that are adopted within academies)

Before, during and after use of academy transport, the following steps will be taken to minimise risk of infection/transmission.

- Thorough washing of hands/ 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, linked to updated guidance regarding communal spaces and/or if they are likely to come into very close contact with people outside of their group or who they do not normally meet)

Impact on risk through mitigation above	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>• Active monitoring processes being implemented</li> <li>• Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b><i>lower risk by implementation of all protective factors guidance.</i></b>
	1	5	5	

## N: CLEANING AND WASTE

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
M1	Ineffective cleaning of all sites. Lack of understanding of additional measures, to be implemented in the situation of a suspected case on site.	3	5	15	SBM/Site Supervisors	VL/MF SITE STAFF/SBMs	Daily site monitoring Weekly review (AC) Review/update in line with PH guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<ul style="list-style-type: none"> <li>All sites are supported by an external cleaning service provider – with Covid 19 cleaning systems and procedures ensured. All Academy/Central Team leads will be provided with copies of contractor protocols. Most recently updated by provider October 2020</li> <li>Academy leaders will ensure that all adults and children: frequently wash their hands with soap and water for 20 seconds and dry thoroughly, clean their hands on arrival at the setting, before and after eating, and after sneezing or coughing, are encouraged not to touch their mouth, eyes and nose, use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it')</li> <li>Full opening planning supports zoning of areas/reduction in movement and footfall and de-cluttering of spaces to support cleaning and hygiene.</li> <li>The Deputy Finance Officer oversees all aspects of the cleaning contract, supported by the DFO/HR Director, SBMs and site teams.</li> <li>The DFO and provider have implemented additional deep cleaning and sanitization protocols additionally as required beyond scheduled and additional cleaning regimes.</li> <li>The Provider will provide additional guidance to all Academy leaders and staff regarding cleaning protocols.</li> <li>For secondary academies, additional cleaning linked to Lateral Flow Testing programme areas will be implemented in line with guidance.</li> </ul>							
<p>In the case of any person being unwell on the site, (see section below), where there is a suspected/actual case of Covid 19, ELG and the HR Director, with SLG will</p> <ol style="list-style-type: none"> <li>Seek advice as required from the DfE Public Health Advisors and local Public Health England (PHE) Health Protection Team (HPT)</li> <li><b>Ensure implementation of all steps in the government guidance:</b> <a href="https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings">https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings</a></li> </ol> <ul style="list-style-type: none"> <li>Cleaning an area/Use of PPE and cleaning products use.</li> <li>Storage of waste pending outcomes from testing/disposal of products used and waste materials.</li> <li>Laundry</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	Additional information:		
		1	5	5 (Dec)	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## O: CATERING

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
O1	Organisation of catering on site to support social distancing, reducing risk to effective infection control and health of the site community.	3	5	15	City Catering CLT Catering	VL SBMs	Daily site monitoring Weekly review /update in line with PH guidance
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local Tier restrictions, and as cited in other areas of this strategy.</b>							
<ul style="list-style-type: none"> <li>All catering teams have relevant Covid 19 secure protocols in place and are aware and updated with regard to academy Covid 19 secure risk strategy areas and government guidance. <a href="https://www.gov.uk/government/publications/covid-19-guidance-for-food-businesses/guidance-for-food-businesses-on-coronavirus-covid-19">https://www.gov.uk/government/publications/covid-19-guidance-for-food-businesses/guidance-for-food-businesses-on-coronavirus-covid-19</a></li> <li>All sites implement zoning, to eradicate communal gathering areas and minimise footfall/sharing of spaces and resources, in line with social distancing protocols.</li> <li>All sites used the full opening planning toolkit to assess the most effective ways to accommodate lunch provision, including consideration of use of biometrics/sanitisation for this - menu options in line with legal guidance on provision. This included planned staggering lunch times, making arrangements for lunches to be taken within zones and/or minimising use of facilities to appropriate numbers, with clean down protocols in between use by groups.</li> <li>Where active monitoring and review identify an opportunity to develop/adapt systems, revised planning is initiated and consulted upon appropriately.</li> <li>The DFO, V. Leon, will liaise with City Catering and with the Trust's Catering services to review catering protocols and ensure that they meet all H&amp;S and government/PHE updated guidance and recommendations for preparation and serving of food, hot and cold. All Academy/Central Team leads will be provided with copies of protocols.</li> <li>Academy leaders have put steps in place to ensure use of staff areas does not conflict with zoning arrangements on the site. Use of any kitchen facilities has been included in this review and planning and shared use of equipment/communal areas has been appropriately provisioned.</li> <li>Social distancing protocols will apply to all children and staff whilst lunch is being taken, lunches are staggered and zoned appropriately to ensure this.</li> <li>Use of face coverings by secondary age students, in communal areas and corridors, where they are potentially mixing with peers outside of their usual bubbles, will be applied appropriately and in line with guidance. Students must wear face coverings on entry to lunch and as exiting. Face coverings can only be removed whilst eating.</li> <li>Primary Principals and their Senior Leadership teams will consider and make plans to ensure that very young children are able to eat lunch, independent of any direct support from staff. This will include liaison with parents as required.</li> <li>Where arrangements need to be made for complex needs pupils, there will be a risk assessment in place to support this.</li> <li>Waste disposal is in line with catering services H&amp;S protocols along with compliance with Covid 19 secure protective measures.</li> </ul>							
<b>Impact on risk through mitigation above</b>		<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b>		
		1	5	5 (Dec)	Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections above/below.</li> </ul> Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b>		

## SECTION 3 CONTINGENCY

### P: CONTINGENCY FRAMEWORK AND REMOTE LEARNING

Risk No	Risk Name (briefly describe the risk)	Probability (1-5)	Impact (1-5)	Total Risk (probability x impact)	Responsibility	Monitoring	Dates for review
K1	A local outbreak on site, or across the local area results in the academy needing to close, or partially close to a group/groups.	5	5	25	MF (OTH) SLG	ELG MF (HR)	Daily site monitoring. Weekly review Review/update in line with PH guidance.
<b>MITIGATION STRATEGIES: Government/PHE protective factors guidance will be followed in full, in line with Local/National Tier restrictions, and as cited in other areas of this strategy. Where there is a confirmed case/outbreak or a Local Level Alert change and specific actions are recommended, they will be followed in all cases.</b>							
<b>Group(s) self-isolation recommended.</b>							
<b>All staff will be made aware of:</b> <ul style="list-style-type: none"> <li>In some cases, health protection teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure, e.g. a year group. In the event that this is recommended, the CEO must be advised immediately.</li> </ul>							
<b>Closure of a site/community area. Following implementation of the Contingency Framework, an educational setting should not move to implement restrictive measures of the kind set out in the contingency framework without the explicit agreement of DfE. For January 2021 – this has been enacted for secondary academies with a staggered return and subsequently for all schools linked to National Lockdown.</b>							
<b>All staff will be made aware that:</b> <ul style="list-style-type: none"> <li>If Principals have concerns regarding the ability to remain open, <b>the CEO must be advised immediately. No decision to close a site can be made until all required processes have been followed and a decision has been made, in accordance with guidance.</b></li> <li>In the event that the DfE Public Health Advisors/ Local Authority Covid 19 response team direct the partial closure/closure of an academy/site, or additional actions are set locally, related to tiers in place, the CEO will be advised immediately of recommendations and actions will ensue as required.</li> </ul>							
<b>Informing parents</b>							
<b>All staff will be made aware that:</b> <ul style="list-style-type: none"> <li>In the event of the Public Health response team, or the CEO in discussions with the DfE/RSC, taking the decision to partially close/close a site/apply the contingency framework, guidance will be given with regard to information for parents and the local community.</li> </ul>							
<b>Media Communications</b>							
<b>All staff will be made aware that:</b> <ul style="list-style-type: none"> <li>In the event that an academy is contacted directly by the media, for any reason, no statement or information is to be provided. Contact details should be taken and contacts advised that a Senior colleague will respond accordingly. This information must then be immediately directed to the ELG (Executive Leadership Group) via Karen Greenhall. <a href="mailto:kgreenhall@citylearningtrust.org">kgreenhall@citylearningtrust.org</a></li> </ul>							

<b>Remote Learning</b>				
<b>Planning:</b>				
<ul style="list-style-type: none"> <li>Remote education planning is in place for individual or groups of self-isolating pupils, to enable them to engage with curriculum learning as is taking place on site.</li> <li>Remote education planning in place for the rare scenario whereby the contingency framework comes into play.</li> </ul>				
<b>Blended Learning:</b>				
<ul style="list-style-type: none"> <li>High-quality online and offline resources, teaching videos, live learning opportunities are prepared and linked to the academy's curriculum expectations and provision.</li> <li>Online platform tools will be consistently used, in order to allow interaction, assessment and feedback are ready and staff are trained in how to use them effectively.</li> <li>Printed resources, such as textbooks and workbooks are immediately available for pupils who do not have suitable online access.</li> <li>Plans are in place to work with families to enable delivery of a broad and ambitious curriculum for younger/SEND pupils.</li> </ul>				
<b>For situations when teaching pupils remotely becomes necessary, plans are effectively in place to immediately be able to:</b>				
<ul style="list-style-type: none"> <li>Teach a planned and well-sequenced curriculum so that knowledge and skills are built incrementally, with a good level of clarity about what is intended to be taught and practised in each subject.</li> <li>provide frequent, clear explanations of new content, delivered by a teacher in the school or through high quality curriculum resources and/or videos</li> <li>Gauge how well pupils are progressing through the curriculum using questions and other suitable tasks, and provide feedback, at least weekly, using digitally facilitated or whole-class feedback where appropriate</li> <li>Enable teachers to adjust the pace or difficulty of what is being taught in response to questions or assessments, including, where necessary, revising material or simplifying explanations to ensure pupils' understanding</li> <li>Set work that is of equivalent length to the core teaching pupils would receive in school, and as a minimum: <b>primary:</b> 3 hours a day, on average, across the school cohort <b>secondary:</b> 4 hours a day, with more for pupils working towards formal qualifications this year.</li> <li>Have systems for checking, at least weekly, whether pupils are engaging with their work, and inform parents immediately where engagement is a concern</li> </ul>				
<ul style="list-style-type: none"> <li>Home working protocols are in place for staff for as/if needed.</li> <li>All staff have experience of working from home and expectations for this.</li> <li>All staff have experience of line management and welfare contact systems when home working.</li> <li>A CLT Curriculum, blended learning and online communications policy suite is available to all academies. (September 2020)</li> </ul>				
<b>Welfare and support</b>				
<b>For situations when individuals/groups are self-isolating, or the contingency framework is agreed and implemented.</b>				
<ul style="list-style-type: none"> <li>Plans regarding keeping in touch contact to be made with each pupil/parent, when and how.</li> <li>Welfare and Inclusion leaders on each site are briefed regarding immediate protocols in the event of a group self-isolating/contingency framework being implemented.</li> <li>Systems are in place for checking, at least weekly, whether pupils are engaging with their work, and inform parents immediately where engagement is a concern</li> </ul>				
<b>Impact on risk through mitigation <u>above alongside other protective factors mitigation, which contribute to a reduction of risk in this area.</u></b>	<b>Probability (1-5)</b>	<b>Impact (1-5)</b>	<b>Total Risk (probability x impact)</b>	<b>Additional information:</b> Risk can be further mitigated against and so lowered, through: <ul style="list-style-type: none"> <li>Active monitoring processes being implemented</li> <li>Additional strategies outlined across sections below.</li> <li>Current scientific guidance records <b>lower risk by implementation of all protective factors guidance.</b></li> </ul>
	3	4	10 (Dec)	

## APPENDIX 1: Government and H&S Guidance Links:

Additional guidance referenced in the updates from September 2020 are listed below:

1. Policy update on face coverings <https://www.gov.uk/government/news/update-on-face-coverings-in-schools>
1. RHE training module: <https://www.gov.uk/guidance/teaching-about-mental-wellbeing>
2. Work with school health team - <https://www.gov.uk/government/publications/healthy-child-programme-0-to-19-health-visitor-and-school-nurse-commissioning>
3. Test and Trace: <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works#people-who-develop-symptoms-of-coronavirus>  
<https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/>
4. Stay at home guidance: <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>
5. Guidance on safe use of PPE: <https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe>
6. Decontamination: <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings>
7. Safe working: <https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care>
8. PHE Locality Teams: <https://www.gov.uk/guidance/contacts-phe-health-protection-teams>
9. Getting Tested: <https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested>
10. Shielding updates: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>
11. Clinically vulnerable: <https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing#clinically-vulnerable-people>
12. Review of disparities in risks: <https://www.gov.uk/government/publications/covid-19-review-of-disparities-in-risks-and-outcomes>
13. Mental Health support: <https://www.gov.uk/government/news/extra-mental-health-support-for-pupils-and-teachers>  
<https://covid.minded.org.uk/>
15. Remote Education: <https://www.gov.uk/government/collections/case-studies-remote-education-practice-for-schools-during-coronavirus-covid-19>  
<https://www.gov.uk/government/publications/coronavirus-covid-19-online-education-resources>
15. Safeguarding in Covid 19: <https://www.gov.uk/government/publications/covid-19-safeguarding-in-schools-colleges-and-other-providers>
16. Staff taking leave: <https://www.gov.uk/government/publications/coronavirus-covid-19-how-to-self-isolate-when-you-travel-to-the-uk/coronavirus-covid-19-how-to-self-isolate-when-you-travel-to-the-uk>
17. School Kitchens/Catering: <https://www.gov.uk/government/publications/covid-19-guidance-for-food-businesses/guidance-for-food-businesses-on-coronavirus-covid-19>
18. Legionella: <https://www.hse.gov.uk/coronavirus/legionella-risks-during-coronavirus-outbreak.htm>
19. Air conditioning and ventilation: <https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm>
20. HSE: <https://www.hse.gov.uk/coronavirus/working-safely/index.htm>
21. RIDDOR Reporting. <https://www.hse.gov.uk/news/riddor-reporting-coronavirus.htm>

22. Educational visits: <https://www.gov.uk/government/publications/coronavirus-covid-19-travel-advice-for-educational-settings/coronavirus-travel-guidance-for-educational-settings>
23. Extra-curricular: <https://www.gov.uk/government/publications/protective-measures-for-holiday-or-after-school-clubs-and-other-out-of-school-settings-for-children-during-the-coronavirus-covid-19-outbreak/protective-measures-for-out-of-school-settings-during-the-coronavirus-covid-19-outbreak>
24. Sport and physical exercise: <https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-phased-return-of-sport-and-recreation>  
<https://www.afpe.org.uk/physical-education/wp-content/uploads/COVID-19-Interpreting-the-Government-Guidance-in-a-PESSPA-Context-FINAL.pdf>
25. EEF Catch up Programmes guidance: <https://educationendowmentfoundation.org.uk/covid-19-resources/covid-19-support-guide-for-schools/>
26. Behaviour: <https://www.gov.uk/government/publications/behaviour-and-discipline-in-schools>
27. Assessment and Accountability: <https://www.gov.uk/government/publications/coronavirus-covid-19-school-and-college-performance-measures/coronavirus-covid-19-school-and-college-accountability>
28. Coronavirus Act 2020. <https://www.gov.uk/government/publications/remote-education-temporary-continuity-direction-explanatory-note>
29. Royal College of Obstetrics and Gynaecology guidance : <https://www.rcog.org.uk/globalassets/documents/guidelines/2020-07-24-coronavirus-covid-19-infection-in-pregnancy.pdf>
30. <https://www.educationsupport.org.uk/> 08000 562561
31. Updated Guidance for January 2021: <https://www.gov.uk/government/publications/schools-and-childcare-settings-return-in-january-2021/schools-and-childcare-settings-return-in-january-2021>
32. Contingency Framework: [https://www.gov.uk/government/publications/coronavirus-covid-19-contingency-framework-for-education-and-childcare-settings?utm\\_source=31%20December%202020%20C19&utm\\_medium=Daily%20Email%20C19&utm\\_campaign=DfE%20C19](https://www.gov.uk/government/publications/coronavirus-covid-19-contingency-framework-for-education-and-childcare-settings?utm_source=31%20December%202020%20C19&utm_medium=Daily%20Email%20C19&utm_campaign=DfE%20C19)

## **Appendix 2: September 2020: Government Guidance on how to wear a face covering.**

<https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own#how-to-wear-a-face-covering>

### **A face covering should:**

- cover your nose and mouth while allowing you to breathe comfortably
- fit comfortably but securely against the side of the face
- be secured to the head with ties or ear loops
- be made of a material that you find to be comfortable and breathable, such as cotton
- ideally include at least two layers of fabric (the World Health Organisation recommends three depending on the fabric used)
- unless disposable, it should be able to be washed with other items of laundry according to fabric washing instructions and dried without causing the face covering to be damaged

### **When wearing a face covering you should:**

- wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on
- avoid wearing on your neck or forehead
- avoid touching the part of the face covering in contact with your mouth and nose, as it could be contaminated with the virus
- change the face covering if it becomes damp or if you've touched it
- avoid taking it off and putting it back on a lot in quick succession (for example, when leaving and entering shops on a high street)

### **When removing a face covering:**

- wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before removing
- only handle the straps, ties or clips
- do not give it to someone else to use
- if single-use, dispose of it carefully in a residual waste bin and do not recycle
- if reusable, wash it in line with manufacturer's instructions at the highest temperature appropriate for the fabric
- wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser once removed.

## APPENDIX 3 – LOCAL PHE Template to record school absences

In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible

Date	Name	Class	Reason for absence*	Date of onset of symptoms	Symptoms **	Has the child/staff been assessed by GP, NHS 111 etc? Y/N/NK	Has the child/staff been tested? Y/N/NK	Is the child/staff reporting a positive test result? Y/N/NK	Identified contact who will need to isolate if positive test	Is the child/staff in hospital? Y/N/NK	Action taken including who and which organisation notified

**Reason for absence\*:** Ill, Household member ill, Contact of a confirmed/suspected case, Shielding, Other e.g. dental appointments

**Symptoms \* T = Temp ( $\geq 37.8$  C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other**

## APPENDIX 4 – LOCAL PHE Template to record illness at school

In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible

Date	Name	Class	Date of onset of symptoms	Symptoms **	Time between detection of symptoms and isolation at school	Did the staff member wear PPE? Y/N	Identified contacts who will need to isolate if positive test

\* Symptoms T = Temperature ( $\geq 37.8^{\circ}\text{C}$ ), C = Cough, D= Diarrhoea, V= Vomiting, ST = Sore Throat, H = Headache, N= Nausea, LST = Loss of smell/taste, Other.

\*\* (PPE) Only required if social distancing could not be observed.