

PARTIAL RETURN TO SCHOOL INFECTIOUS DISEASES COVID-19

Colmers Farm School Version 15 – 19th May 2021

This risk assessment will be regularly updated based on Government advice/regulations and circumstances within our school. Please refer to www.gov.uk for the latest guidelines.

The use of this or any other Risk Assessment will NOT make any building COVID safe.

HAZARD	RISK GROUP	RISK	CONTROL MEASURES (Describe the existing workplace precautions and risk control systems in place)	Residual Risk Rating HIGH MED LOW	Are Existing Controls Adequate?	
					Yes	No*
Arriving to school	Pupils Staff Parents Others	Spread of Infection due to close contact	<ul style="list-style-type: none"> The Morrisons gate entrance will be divided into an entrance and exit lane with arrows to indicate which is which. Staggered start and end of day times (Reception, Year 2, Year 4 and Year 6 – Normal times and Year 1, Year 3 and Year 5 (8:45 - 8:55 and end of day 3:25). Only 1 parent/carer per family to be allowed on site. Parents will be asked to wear a face mask (if they are able to) whilst on the school site. Any visitors who have been authorised to enter the school will have the risk assessment explained to them on entry. They will also be asked to provide track and trace contact details. They will also be requested to wear a face mask whilst onsite (unless directly working with children i.e. visiting teachers). They must wear a face mask whilst in the school building. No parents to be admitted into school building (except in exceptional circumstances). Access will be to exterior office reception area only in strictly enforced 		Y	

			<p>numbers. Queries to be dealt with via telephone/email if possible. Parents wishing to speak to staff, must make an appointment.</p> <ul style="list-style-type: none"> • The 2-metre rule should be followed by parents while they are waiting for staff to receive their children. This will be communicated to be parents by website, letters, posters and social media. • Any staff members outside with parents, before or after school, must wear a face covering. • No parental events i.e. workshops/parent evenings/sports days are to be undertaken, this will however be reviewed as new guidance is published. • Anyone exhibiting COVID symptoms should not enter the school site. • Children will enter school through their assigned year group doors (see the welcoming children back to Colmers Farm Primary School in September 2020 document on the school's website). • Hand sanitiser is located by office entrance for staff and visitors to use and by all entrance doors for children. This must be used by all staff and visitors. A member of staff will be on each entry door to ensure children use the hand sanitisers located by each entrance door or wash their hands on entry. 			
Staff receiving child from parent	Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Staff on the playground at the start and end of the day and staff receiving children by doors must wear a face covering. Please note, that the incorrect handling of face masks can lead to an increased risk of contamination. 		Y	

			<ul style="list-style-type: none"> Staff will direct children to use the hand sanitiser by the door, or to wash their hands, and to proceed directly to their classroom. 			
Classroom set up	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> In all year groups, the teacher should endeavour to socially distance from the children's tables/desks. In particular, they should avoid close face to face contact and minimise time spent within 1 metre of anyone. Tissues will be available on each table for pupils to use when coughing or sneezing and they must go into a bin after one use. Each child will have their own equipment bags, containing their pens, pencils etc. Equipment, where possible, should not be shared. Where possible, frequently used equipment will be regularly cleaned. Children are to use the same allocated seat each day within their bubbles. Items that are soft furnishings e.g. soft toys, cushions etc will be removed from classrooms. Classrooms should be well ventilated with windows and the main class door being opened. In cooler weather windows should be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space. If children change rooms, they should wash their hands or use the hand sanitiser. Outside space, as a learning environment, should be used as often as possible with no more than one bubble together. Reading books can be sent home. When returned, books should not be reused for 48 hours. A box should 		Y	

			<p>be set up in each classroom to receive returned books. All books should be returned to school on a Monday to ensure they are ready to be reissued later in the week.</p> <ul style="list-style-type: none"> • School bags can be brought into school. Children will however be asked to limit what they bring in from home. • Children are not to bring in sweets, cakes and other treats from home for birthdays. • Breakfast club and afterschool clubs are available. In terms of breakfast club, this may constitute children being part of an additional bubble. Parents are made aware of this. Children will stay in bubbles where possible, and where this is not possible no more than 15 children may be with each adult. Only one year group bubble will take part in each after school club. • It is not advised for staff or children to wear PPE in classrooms. • Singing should not take place in large groups unless natural airflow and strict social distancing and mitigation can be maintained. 			
Classroom Lessons	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Teaching staff must keep a safe distance at all times, where possible, when teaching. • Where children may require extra assistance a 2-metre rule must try to be followed. • Interventions and 1:1 teaching may take place with due regard to distancing, shared resources and direction of speech. • Year groups are a consistent bubble. These will support some teaching activities, play and lunchtimes. These bubbles will be kept apart from other bubbles where 		Y	

			<p>possible, such as through staggered dinnertimes and playtimes.</p> <ul style="list-style-type: none"> • If children change rooms, they should wash their hands or use the hand sanitiser. • At least one senior leader will be non-class based at all times. • Staff should not enter rooms which do not contain their bubbles (unless they are providing cover in these). • The message of social distancing should be reinforced to the children for when they are moving around school or outside. Children should equally be regularly reminded of the 'catch it, bin it, kill it' and washing/sanitising hands regularly message. 			
Children requiring use of the toilet	Children Staff	Infection Control	<ul style="list-style-type: none"> • Inform the child of the importance of washing their hands after using the toilet. • Ensure toilets are not overcrowded by limiting the numbers of children using at any one time. • All toilets within the school building will be regularly cleaned during the day. A cleaning checklist will be displayed on the outside of all toilet doors. 		Y	
Break times	Children Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Children informed in class about of the importance of social distancing whilst outside. • Outdoor play equipment can be used by one bubble each day. • Supervising staff must stay with their bubbles at breaktimes. • All breaktimes will be staggered to avoid contact with other groups or will be held in separate zones. • Year group equipment such as hoops or footballs may be used during this time, but must be cleaned after use. 		Y	

			<ul style="list-style-type: none"> Children must use the hand sanitisers when re-entering the school building or wash their hands. 			
Break Times – Staff Room	Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> The staffroom can be used as a leisure area, however the use of this should be kept to a minimum and social distancing should take place. No more than 6 members of staff should be in the staffroom at once and there should be no crossover of bubbles within this. Each staff bubble will be assigned a dining area in a separate room. The drinks machine should be wiped down after each use with anti-bacterial wipes. Photocopiers will be provided with cleaning materials, please wipe down after each use. Staff must make their own drinks/food and wash and dry their own cups and other crockery and utensils thoroughly using warm soapy water. Dishwashers will not be used during this period. Staff should regularly wash their hands with soap and water as required. 		Y	
Lunch/Break Times Classrooms	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> Whilst children are on breaks, tables and door handles will be cleaned with a disinfectant or disinfectant spray. Gloves must be worn whilst carrying out this task and hands should be appropriately washed after any cleaning. 		Y	
Lunch breaks	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> Children and staff should wash their hands before and after eating their dinner (this should be with soap and water preferably) and before re-entering the school building at the end of dinner. Where more than one bubble is using the dining room simultaneously, both bubbles will have a separate 		Y	

			<p>entry/exit point and a large space will be kept between them. Tables will be washed when a bubble leaves the room, in preparation for the next bubble.</p> <ul style="list-style-type: none"> • Children may sit opposite one another in the dining room as long as they are within their bubble. • All lunchtimes to be staggered to avoid contact with other groups. Staff must ensure they are on time to receive their children back in their bubbles. • Staff from within a bubble will supervise children during a lunch break, with MDSs stationed at key positions around school. • Dining room use will be on a rota basis. • MDSs in dining areas should wear either a face mask or visor. 			
Assemblies	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> • All assemblies to take place within classrooms, using Microsoft Teams. 		Y	
School building	Staff Children	Spread of infection through touch	<ul style="list-style-type: none"> • Cleaners to, throughout the day, clean regular contact points e.g. door handles, toilets, light switches etc. • Staff are not required to wear face masks in corridors or other areas unless social distancing is not possible. Exceptions apply for those who are unable medically to do this. 		Y	
First Aid – minor treatment	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Where minor first aid treatment is required, First Aiders must ensure they wear disposable gloves, apron and a face covering when dealing with injuries. First aiders must have read https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877658/Quick_guide_to_donn ing_doffing_standard_PPE_health_and_social_care_poster_.pdf 		Y	

			<ul style="list-style-type: none"> • Where possible (age and maturity of child) ask them to wipe away any blood or hold cold compresses etc. • Ensure records of injury and treatment are recorded in line with school policy and who administered first aid treatment. • Always wash hands after contact. 			
First Aid – Life threatening	Staff Children	Spread of Infection due to close contact	<ul style="list-style-type: none"> • In the event of a serious injury or incident call 999 immediately. • Wear disposable face covering and gloves when in close contact or dealing with bodily fluids. Wear eye coverings and fluid resistant face coverings if necessary, with disposable aprons. • In the event of CPR being required it is advised only that chest compressions are given and the use of a defib if required. • Always wash hands after contact 		Y	
First Aid & Medication	Staff Pupils Others	First Aid Procedures	<ul style="list-style-type: none"> • First Aiders must always wear gloves when administering first aid procedures. • A disposable face covering must be worn if having to deliver close contact first aid. (always refer to up to date information from Gov.UK). • Any dressings used to be double bagged. • Where any medications are administered try and encourage the pupils to self-administer or consider wearing a face covering (always refer to up to date information from Gov.UK). • Records of who and when children receive first aid will be kept. These should be given to the DHT/HT each week and kept in a separate place. 		Y	
Children who are upset	Staff	Spread of Infection due	<ul style="list-style-type: none"> • Where a child is upset, it is advised to try to maintain a safe distance whilst offering comfort to child. 		Y	

		to close contact	<ul style="list-style-type: none"> • Encourage child to use a tissue to wipe eyes/nose etc. • If contact is required, consider wearing a face covering. • Wash hands after contact • The pastoral team must keep a register of who they have been in contact with. 			
Children with behavioural issues	Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Where possible allow the child to vent their frustrations • Where possible allow child to be in a room on their own or outside. • If team teach techniques are required, it is advised face coverings and gloves are worn. 		Y	
Children leaving at the end of the school day.	Staff Parents Others	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Staff members supervising outside to inform parents/carer to abide by the 2-metre social distancing rule. • Staff members are not required to wear a face mask. • Children to be dismissed via the appropriate doors. • Parents are advised to stand clear of exit doors. 		Y	
Parent wishing to talk to staff	Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Parents will be informed that the majority of conversations with staff will be either over the phone or if this is not possible a meeting will be arranged in exceptional circumstances and social distancing rules observed. • Parents will be discouraged in congregating around the school site. • Parents' evenings will take place over the telephone or via Teams. 		Y	
Staff communication	Staff	Spread of Infection due to close contact	<ul style="list-style-type: none"> • Site staff to be contacted through the 'Every Site' online helpdesk facility. • No members of staff are to enter another bubble or office/room unless absolutely necessary or an emergency. If this is so, then 2m social distancing rules and hand cleansing on entry and exit must be followed. 		Y	

			<ul style="list-style-type: none"> Any members of staff who need to check on another classroom (such as pastoral team/ SLT) should try not to enter unless absolutely necessary and should communicate from the doorway. IT staff to be contacted through the IT helpdesk facility. All staff training and briefings will take place via Teams. 			
Taking home/marking books	Staff	Spread of infection through contact with books	<ul style="list-style-type: none"> As per the Government Guidance for full opening: schools, children's exercise books may be taken home by staff. We recommend that this is where possible kept to a minimum though. Staff should thoroughly wash their hands after being in contact with any books and that they should restrain from putting their hands near their mouths during this period. 		Y	
Visitors and members of staff who move between bubbles	Staff	Spread of infection between bubbles	<ul style="list-style-type: none"> IT and BSS staff should wear either a face mask or visor when entering classrooms with children and/or other adults present. MDSs should wear a face mask or visor when looking after classes (if moving between multiple bubbles). Visitors should wear a mask when in the school building whilst in corridors and classrooms. This does not include supply or peripatetic teachers such as music staff (unless they are in the corridors/communal spaces). Social distancing should be adhered to as much as possible by staff/visitors who move bubbles. Hands should be sanitised when moving between rooms. First aiders, the nest team and teaching staff who move between bubbles should keep a list of pupils they have contact with. This should include the date and start and 		Y	

			<p>end times of contact. These should be given to the DHT/HT weekly.</p> <ul style="list-style-type: none"> All visitors who visit the school and have entry to the main school building should be temperature checked upon entry. 			
Awareness of policies / procedures / Guidance	Staff Pupils Others	Inadequate information	<ul style="list-style-type: none"> All staff returning back to work must ensure they are aware of the current guidelines in regard to safe distancing and washing hands on a regular basis. All staff are able to access the following information on-line for up to date information on COVID-19 <ul style="list-style-type: none"> ➤ Public Health England ➤ Gov.co.uk ➤ NHS ➤ DfE ➤ Department for Health and Social Care The relevant staff receive any necessary training that helps minimise the spread of infection, e.g. infection control training. (washing of hands, cleaning up bodily fluids). This risk assessment is to be read in conjunction with BCC COVID19 staff guidance <i>(We are in the process of producing our own staff guidance)</i> https://www.birmingham.gov.uk/staffguidance Cleaning Risk Assessment COVID19 Cleaning in a non healthcare setting https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings Staff are made aware of the school's infection control procedures in relation to coronavirus via email or staff meetings and contact the school as soon as possible if 		Y	

			<p>they believe they may have been exposed to coronavirus.</p> <ul style="list-style-type: none"> • Parents are made aware of the school's infection control procedures in relation to coronavirus via letter, website, posters or social media – they are informed that they must contact the school as soon as possible if they believe their child has been exposed to coronavirus. • Pupils are made aware of the school's infection control procedures in relation to coronavirus via school staff and are informed that they must tell a member of staff if they feel unwell. • A fire drill will take place in the school at least once per term. Leaving the building, when the fire alarm sounds, as quickly and as safely as possible overrides social distancing rules. • All staff, including those who use PPE, should read the following guidance. This has been emailed to all staff: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877658/Quick_guide_to_doffing_doffing_standard_PPE_health_and_social_care_poster_.pdf 			
Poor hygiene practice	Staff Pupils Others	Ill Health	<ul style="list-style-type: none"> • Posters are displayed throughout the school reminding pupils, staff and visitors to wash their hands, e.g. before entering and leaving the school and also social distancing. • Pupils, staff and visitors are encouraged to wash their hands with soap or use the sanitiser provided and to follow infection control procedures in accordance with the DfE and PHE's guidance. • Sufficient amounts of soap (or hand sanitiser where applicable), clean water and paper towels/hand dryers are supplied in all toilets and kitchen areas. 		Y	

			<ul style="list-style-type: none"> • Children to be reminded regularly about not touching faces. • Pupils may be supervised by staff when washing their hands to ensure it is carried out correctly, where necessary. • Communal water dispensers will not be used in school. Pupils to be encouraged to bring in prefilled water bottles from home. • Pupils are forbidden from sharing cutlery, cups or food. • All cutlery and cups are thoroughly cleaned before and after use. • All classrooms to have lidded bins. Lids must be closed after use. • Tissues which have been used are to be double bagged (i.e. in nappy sack and bin bag). • Bins to be emptied regularly throughout the day. • Cleaners to carry out daily, comprehensive cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy. • A senior member of staff arranges enhanced cleaning to be undertaken where required – advice about enhanced cleaning protocols is sought from the Health Protection Team /Public Health England 			
Ill health	Staff Pupils Others	Coronavirus Symptoms	<ul style="list-style-type: none"> • Children/adults with others in their home who have symptoms should not be in school. • Any staff/pupils who exhibit symptoms must go for a test at the earliest possible time. They will not be allowed to return to school until this has been done. If the test proves negative, they are allowed to return to school if they are well enough to do so. 		Y	

			<ul style="list-style-type: none"> • If a child or adult within a group tests positive for COVID, the local health protection team will be contacted (or they will contact the school). This team will then carry out a rapid risk assessment to confirm who has been in close contact with the person during the period they were infectious. The infected individual must self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Based on the advice from the health protection team, we will send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 10 days since they were last in close contact with that person when they were infectious. See Appendix 4 for further information regarding this. • Staff are informed of the symptoms of possible coronavirus infection, e.g. a persistent cough, difficulty in breathing, loss of taste or smell and high temperature, and are kept up to date with national guidance about the signs, symptoms and transmission of coronavirus. • If there is a risk of being splashed by vomit or other bodily fluids, then face coverings must be worn with a fluid resistant surgical facemask. • Any pupil or member of staff who displays signs of being unwell, such as having a cough, fever or difficulty 		
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			<p>in breathing, and believes they have been exposed to coronavirus, is immediately taken out of the class and placed in an area where they will not come into contact with others and are supervised at all times. The area for this school will be the June's old office. The relevant member of staff calls for emergency assistance immediately if pupils' symptoms worsen.</p> <ul style="list-style-type: none"> • The parents of unwell pupils are informed as soon as possible of the situation by a relevant member of staff. • Where contact with a pupil's parents cannot be made, appropriate procedures are followed in accordance with those outlined in governmental guidance. • Unwell pupils, with non-Covid symptoms, who are waiting to go home are kept in an area where they can be at least two metres away from others. The area for this school will be outside the main office. • Areas used by unwell staff and pupils who need to go home are appropriately cleaned once vacated, using a disinfectant and care to be taken when cleaning all hard surfaces. • If unwell, pupils and staff are waiting to go home, they are instructed to use different toilets to the rest of the school to minimise the spread of infection (the toilet in the first aid room). • Any pupils who display signs of infection are taken home immediately, or as soon as practicable, by their parents – the parents are advised to contact NHS 111 immediately or call 999 if the pupil becomes seriously ill or their life is at risk. • Any members of staff who display signs of infection are sent home immediately and are advised to contact NHS 		
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			<p>111 immediately or call 999 if they become seriously ill or their life is at risk.</p> <ul style="list-style-type: none"> Adults and pupils will not be allowed to return to school, if they have been sent home or display Covid symptoms, until they have received a negative test result. In the event of a bubble having to isolate, the school will initiate its remote learning plan for this bubble. 			
Ill Health	Staff	Pre existing conditions	<ul style="list-style-type: none"> In local restriction tier 4 areas, individuals who are clinically extremely vulnerable are advised to work from home and where this is not possible, they should not go into work. See 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 for a definition of this group. 		Y	
Spread of infection	Staff Pupils Others	Lack of infection control	<ul style="list-style-type: none"> Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with guidance, using PPE at all times. See https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877658/Quick_guide_to_donning_doffing_standard_PPE_health_and_social_care_poster_.pdf Parents are informed not to bring their children to school or on the school premises if they show signs of being unwell and believe they have been exposed to coronavirus. If a member of staff or pupils within a group have been in contact with a confirmed COVID-19 case, those persons in that group are not to return to school before the minimum recommended exclusion period (or the 		Y	

			<p>'self-isolation' period) has passed, in line with national guidance. This is currently 10 days.</p> <ul style="list-style-type: none"> • Pupils can be taken on school trips although this must be within their bubble and to a covid secure location. A risk assessment should be completed prior to this. • Parents must notify the school if their child has an impaired immune system or a medical condition that means they are vulnerable to infections. • The school in liaison with individuals' medical professionals where necessary, reviews the needs of pupils who are vulnerable to infections. • Any additional provisions for pupils who are vulnerable to infections are put in place by the headteacher, in liaison with the pupil's parents where necessary. • All essential staff training/ meetings, where social distancing cannot be facilitated, to be held virtually. • Children will be asked to come to school in suitable PE kits on PE days. 			
Poor management of infectious diseases	Staff Pupils Others	Lack of infection control	<ul style="list-style-type: none"> • Everyone is instructed to monitor themselves and others, stay alert and look out for similar symptoms if a pupil or staff member has been sent home with suspected coronavirus. • Staff are vigilant, stay alert and report concerns about their own, a colleague's or a pupil's symptoms to the Headteacher or SLT as soon as possible. • The school is consistent in its approach to the management of suspected and confirmed cases of coronavirus. • The school is informed by pupils' parents when pupils return to school after having coronavirus – the school informs the relevant staff. 		Y	

			<ul style="list-style-type: none"> • Staff inform the headteacher/head of school when they plan to return to work after having coronavirus. • A nominated person monitors the cleaning standards of school cleaning contractors and discusses any additional measures required with regards to managing the spread of coronavirus. 			
Covid 19 variants becoming present within the local community.	Staff Pupils Parents Others	Increased spread or mortality rate of new variants	<ul style="list-style-type: none"> • We will follow the local or national government procedures for this. 		Y	

Please note:

Colmers Farm Primary School will undertake all measures possible to prevent the spread of infection. Unfortunately even with all measures put into place, the school/Excelsior MAT cannot guarantee 100% that any school site, or persons upon the site are COVID free. Nor can we guarantee that we can fully maintain social distancing between the children and adults within each group.

Appendix 1

Cleaning Schedule for use in Excelsior Schools

This guidance is to be used alongside the Government Publication COVID 19 decontamination in non-healthcare settings.

<https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings>

- One member of the cleaning staff to be in school all day to clean areas that are being used during the day – toilets, classrooms, corridors, door handles, clean surfaces that children and staff are touching, desks, chairs, doors, sinks, toilets, light switches, bannisters.
- Cleaning staff will be rota'd throughout the week where possible.
- The designated cleaner to make sure there is ample supplies of hand soap/paper towels in all areas of the school where needed. All hand sanitisers to be checked and refilled daily.
- Tissues and hand sanitisers are to be available in every classroom in use.
- All bins are emptied throughout the day with facilities to ensure used tissues etc are double bagged.
- All remaining cleaning staff to be in at the end of the day to do a deep clean daily in all rooms in use that day – all non-cleaning staff must be off site before the deep clean is started so as not to cross contaminate areas to ensure a ready and clean start of the next school day.
- All areas/supplies to be checked at the end of the day to make sure for eg soap,paper towels, tissues, tissue bags, hand sanitisers are fully stocked up ready for the start of the next school day.



Schools and COVID-19: guidance for Black, Asian and minority ethnic (BAME) staff and their employers in school settings

At the start of May 2020, the NHS released their [call to action to support BAME NHS people](#) and communities during and beyond COVID-19. A draft NHS England document proposed trusts ensure every staff member has a risk assessment to keep them safe, and that guidance will be provided to support employers to create proactive approaches for BAME staff, covering physical and mental health.

While it may not yet be clear why the danger of contracting COVID-19 and subsequent mortality rates are higher for BAME colleagues, it should be clear that a bespoke health and wellbeing offer for BAME staff should be developed and rolled out not just within the NHS, but also across the education system as we start to encourage more teachers and children back into face to face contact. Through acknowledging the very different outcomes for BAME people in particular with regards COVID-19, this could be a vital opportunity to not only put in place safeguards for colleagues now, but also affect lasting change in the imbalance of power, decision-making and representation for BAME colleagues within our education organisations as a whole for the long term.

The following are what an equivalent set of top five calls to action would look like in the education sector if they were to mirror that of the NHS guidance:

- 1) **Protection of staff** which includes risk assessments that specifically take into account the physical and mental health of BAME staff. The NHS has provided [guidance](#) for employers on risk prioritisation and management which includes ethnicity. This includes ensuring that line managers are supported to hold conversations with BAME staff that are sensitive and comprehensive, and that these should be held on an ongoing basis as physical and mental health are prone to changes.
- 2) **Engagement with staff** and relevant networks is paramount. Communication with these should be strengthened so that managers can hear and learn from lived experience - this includes initiating webinars and facilitated discussions including BAME and non-BAME colleagues within unions, MATs, BAME network leaders, local authorities, the DfE, leadership and governance associations and other stakeholders with the aim of starting a meaningful dialogue that will result in some real change across the education sector.
- 3) **Representation in decision making** is critical to include BAME staff as key influencers in decisions that may be made that directly affect them. There should be a national audit of BAME representation (segmented into the respective groups and not lumped together as a broad category of 'non-white' peoples) across educational leadership, governance and leading policy-making functions of all education organisations. This should be tackled head on and the imbalance addressed from school level and right up into government policy as a matter of urgency.
- 4) **Rehabilitation and recovery** to make sure there is bespoke and continuing health and wellbeing support throughout and beyond the crisis. The disproportionate impact of COVID-19 on BAME communities is acute, both personally and professionally. Teaching colleagues are already under pressure as frontline actors in uncertain times. We need to ensure that the unique needs of our BAME colleagues are met both now, and in the future. This could be the start of a long-awaited change.
- 5) **Communications and media.** The media representations of the education sector do not tend to include BAME colleagues. To create positive representations from, with and about BAME staff and students, we should be holding to account all education organisations from the

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Black, Asian & Minority Ethnic EDUCATORS

smallest school settings and through to the higher echelons of decision-makers and power holders, to ensure that their media and other communications are positive about BAME colleagues and students and representative in terms of optics as well as content matter.

We are indebted to our education professionals, teachers and support staff alike, who are going above and beyond to adapt and excel, teaching and caring for the young people they serve in these difficult times. We need to harness our collective passion, and commitment to true equality for all, at a time of increased complexity, challenge and emotional strain. We hope we can make real and lasting change for our BAME colleagues and the communities we all serve.

The duty of care

There are a range of statutory requirements that together form part of the duty of care that schools owe to their staff, and by extension to pupils and visitors such as parents. In the school setting these would include

- **Section 1 (2) Health and Safety at Work etc Act 1974** which states: "It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees."
- **Regulation 3 (1) of the Management of Health and Safety at Work Regulations 1999** which provides that: "Every employer shall make a suitable and sufficient assessment of the risks to the health and safety of his employees to which they are exposed whilst they are at work; and the risks to the health and safety of persons not in his employment arising out of or in connection with the conduct by him of his undertaking"
- An Equality Impact Assessment or some other means of meeting the requirement of the **Public Sector Equality Duty contained in section 149 of the Equality Act 2010**, which requires public authorities to have due regard to a number of equality considerations when exercising their functions.

The duty of care is to all staff, and by extension pupils and visitors. No one should work in an environment where foreseeable risk has not been mitigated or removed as far as is reasonably practicable. Staff (including managers) have a duty of care to themselves, to colleagues, to those they manage or employ and to those they provide services to.

We know from Public Health England, from the Office of National Statistics and from a range of recently published research that some groups of people are more at risk from COVID 19, notably those with certain long term health conditions. BAME staff are particularly at risk, and the NHS has specifically identified the importance of risk assessments for BAME staff

This evidence has underpinned the NHS approach to risk assessment for all staff, not simply those in high risk areas. The core document being used to underpin risk assessments is <https://www.fom.ac.uk/covid-19/update-risk-reduction-framework-for-nhs-staff-at-risk-of-covid-19-infection>

If we were to have a parallel risk assessment guidance document and tool for staff in education settings, they may look like this:



Impact of COVID-19 on Black, Asian and Minority Ethnic (BAME) staff in school settings

Introduction

There is an officially acknowledged high and disproportionate number of deaths of Black, Asian and Minority Ethnic (BAME) people due to COVID-19. As such, there is a need for initial guidance on risk mitigation for urgent implementation across all education settings.

Risk assessment

Risk assessment should be carried out for all staff, but especially for BAME staff as a priority, so that a personalised risk mitigation plan can be put in place for each member of staff. This requires an open and collaborative one to one conversation between the staff member and line manager, aided by the HR or occupational health team as required. It should be conducted within a "done with", co-production approach with the staff member, and not a "done to" approach. This means that the staff member should see the risk assessment document and paperwork before the one to one conversation takes place.

Risk mitigation

Surveys and accounts from various professional medical and nursing bodies indicate that BAME staff face particular issues with being supported with measures to reduce their exposure to risk. The assumption is that this may be the same across other caring professions, including for teaching and school support staff professionals.

Measures to reduce exposure to risk must be implemented as a priority to protect the lives of staff and students. The measures will need to be in place for some time as the pandemic takes its course, so need to be sustainable. There is a widespread assumption at senior levels of the NHS that a "second wave" of COVID 19 is likely in late Autumn 2020. Regular feedback to see whether interventions are working is vital.

Long term work designed to improve organisational culture and capability will also enhance risk management.

Personal protection equipment (PPE)

Appropriate PPE should be made available and clear instruction and training should be provided to school staff regarding how to wear and dispose of, or re-use these, where fitting. There is ongoing debate for and against use of face masks/face coverings in general for staff, students and the public - guidance should be updated as the evidence evolves and is made available.

Students should be offered an explanation and reassurance about staff wearing PPE.

Staff testing

There is now a national testing process for England. It should be offered to staff with consideration given to prioritising BAME staff and their families, to enable healthy staff to attend work.

Aids for remote working

It is advised that organisations provide resources for remote working for all staff as priority.

Redeployment



BAME staff should be considered for redeployment to lower risk work areas or home working. A proactive offer by the manager as part of an ongoing review, keeping staff needs in mind, will engender confidence that the staff members' needs are being taken seriously.

Working from home

If completely working from home or redeployment is not possible, a balance between working from home and school may be a way of reducing COVID-19 risk exposure. This should be carefully and actively considered rather than staff being made to feel guilty.

Other infection prevention and control measures

Social distancing in all work areas including staff rooms, classrooms and dining areas and hand washing should be undertaken as described in national guidance and should be strictly maintained.

Support for BAME school setting employees to manage additional impact of COVID-19

Vitamin D supplements

Although there is no evidence to suggest that Vitamin D gives specific protection against COVID-19 or prevents complications associated with the virus, low levels of Vitamin D may predispose to severe infection. Staff should be encouraged to have their Vitamin D levels tested, especially BAME staff members. Line managers should meet to discuss ways of making this advice available to staff, especially BAME staff as a priority, as they may be overrepresented in those with low levels of Vitamin D.

BAME staff engagement

Engagement with BAME employees should be a priority, including any staff networks, committees, union and other representative groups that should be invited to Q&A and other engagement events with senior staff. This can ensure the BAME voice is heard by leaders. Staff forums can be useful mediums to initiate debate. It is vital to discuss this issue in all mainstream staff side forums and not just with BAME colleagues. These issues are not just BAME issues but have relevance to all staff and to the whole organisation.

Psychological safety

Staff will need reminders of avenues available to speak out about issues such as poor access to equipment, bullying, and other issues, with an aim to reduce fear of raising concerns and ensuring there is a safe space to do so.

The risk assessment process

The risk assessment tool (below) is a means of structuring the assessment

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Risk assessment tool for staff during the COVID-19 pandemic

General information					
Staff member's name(s)			Job title		
Line manager			Manager's job title		
Work location			Working hours		
Date of assessment			Review date		
Individuals underlying health condition category / other factors	Please tick appropriate box		Current post involves	Please tick appropriate box	
	Notified as on 12 week shielding (very high risk group)			Direct contact with other adults	
	Age (>65 years) Please tick if age is over 50 for BAME staff			Direct contact with children under 12	
	Diabetes			Direct contact with children over 12	
	Chronic lung disease			Providing support to colleagues within the setting (e.g. cleaning, estates, IT)	
	Chronic heart disease			Providing support to colleagues but not directly in the setting (e.g. training)	
	Cancer				
	Pregnancy please tick if over 28 weeks, under 28 weeks if pre-existing risks present				
	Immunosuppression				
	Pre-existing disability that impacts on respiratory morbidity				

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	Impact of carers stress or concerns about family		
	BAME background		
	Gender (please tick if male BAME above 50)		
	Is there a anyone that you live with who is "shielded" in according with the Public England schedule of conditions requiring shielding		

What are you already doing?		
Interventions	Current position	Additional action to reduce risk
Can this work be done at home?		
Could alternative work be undertaken at home or elsewhere across the school/trust (redeployment)?		
Can face to face interactions be limited?		
Have arrangements been made for remote working?		
PPE		
Access to swab testing and prioritising at-risk groups and their family members		
Has the individual had any sickness in the past linked to their health condition?		
Has the individual had a Vitamin D test showing deficiency?		
What arrangements are you going to put in place to ensure		

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regular contact/wellbeing?		
Other considerations:		

Assessment			
Please tick appropriate box		Monitoring / further action	
Actions agreed as detailed above reduce the risks to the colleague		Manager to review and monitor	
Actions agreed as detailed above do not fully reduce the risk to the colleague / some concerns remain		Seek further advice and support	
Additional notes			
Please add any additional notes as appropriate / following discussion with appropriate advice and support provider			
Individual's signature (can be electronic signature of reference to email confirmation)		Date signed	
Print name			

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Line manager's signature (can be electronic signature of reference to email confirmation)	Line manager's job title
Print name	
HR manager's signature (can be electronic signature of reference to email confirmation)	HR manager's job title
Print name	

Guidance notes:

1. The tool is intended to provide structure to a one to one conversation with a staff member to seek a pragmatic and safe working arrangement – it should be conducted within a “done with”, co-production approach with the staff member, and not a “done to” approach. This means that the staff should see the risk assessment document and paperwork before the one to one conversation.
2. There should be guidance produced for staff and line managers to follow should there be a disagreement regarding either the outcome of the risk assessment or the follow up action to be taken.
3. The risk assessment can be used in conjunction with but not replace occupational health assessments of pre-existing disabilities
4. It is recommended that the risk assessment is completed by a line manager, co-signed by a member of staff and further validated by the HR department
5. The risk assessment should be a rolling programme – and should be done again at least every time any family or household member is required to self-isolate, and the staff member should be told with clarity as to what happens immediately
6. Please refer to NHS advice on risk factors and the government advice on shielding staff [here](#)
7. Suggested approach to interpreting risk factors are below:

Number of risk factors	Proposed action
Singular risk factor	Consider home working
Multiple factors (≥ 2) or have a very high risk single risk factor	Strong emphasis on home working

Acknowledgements: based on Lincolnshire Partnership NHS Foundation Trust, Derbyshire Healthcare NHS Foundation Trust, Somerset Partnership NHS Trust, Royal College of Psychiatrists and Faculty of Occupational Medicine guidance and assessment.

Schools coronavirus (COVID – 19) operational guidance (May 2021)

Response to any infection

You must always:

10. Promote and engage with the NHS Test and Trace process.
11. Manage and report confirmed cases of COVID-19 amongst the school community.
12. Contain any outbreak by following local health protection team advice.

1. Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school

When an individual develops COVID-19 symptoms or has a positive test

Pupils, staff and other adults must not come into the school if:

- they have one or more [COVID-19 symptoms](#)
- a member of their household (including someone in their [support bubble](#) or [childcare bubble](#) if they have one) has COVID-19 symptoms
- they are legally required to [quarantine, having recently visited countries outside the Common Travel Area](#)
- they have had a positive test
- have been in close contact with someone who tests positive for COVID-19

They must immediately cease to attend and not attend for at least 10 days from the day after:

- the start of their symptoms
- the test date if they did not have any symptoms but have had a positive LFD or PCR test (if an LFD test is taken first, and a PCR test is then taken within 2 days of the positive lateral flow test, and is negative, it overrides the LFD test and the pupil can return to school)

You must follow this process and ensure everyone onsite or visiting is aware of it.

Anyone told to isolate by NHS Test and Trace or by their public health protection team has a legal obligation to self-isolate, but you may leave home to avoid injury or illness or to escape the risk of harm. More information can be found on [NHS Test and Trace: how it works](#).

If anyone in your school develops a new and continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), you must:

- send them home to begin isolation - the isolation period includes the day the symptoms started and the next 10 full days

- advise them to follow the [guidance for households with possible or confirmed COVID-19 infection](#)
- advise them to [arrange to have a test](#) as soon as possible to see if they have COVID-19

Other members of their household (including any siblings and members of their support or childcare bubble if they have one) should self-isolate. Their isolation period includes the day symptoms started for the first person in their household, or the day their test was taken if they did not have symptoms, whether this was a [Lateral Flow Device \(LFD\) or Polymerase Chain Reaction \(PCR\) test](#)), and the next 10 full days. It remains essential that anyone who gets a positive result from an LFD result self-isolates immediately, as must other members of their household, while they get a confirmatory PCR test.

If a member of the household starts to display symptoms while self-isolating they will need to restart the 10-day isolation period and book a test.

If anyone tests positive whilst not experiencing symptoms, but develops symptoms during the isolation period, they must restart the 10-day isolation period from the day they developed symptoms.

In non-residential schools, if a pupil displays COVID-19 symptoms, or has a positive test, while at their school they should avoid using public transport and, wherever possible, be collected by a member of their family or household.

In exceptional circumstances, if parents or carers cannot arrange to have their child collected, as long as it is age-appropriate and safe to do so the child should walk, cycle or scoot home following a positive test result. If this is not possible, alternative arrangements may need to be organised by the school. The local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver, who must be made aware that the individual has tested positive or is displaying symptoms.

If a pupil is awaiting collection:

- they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the pupil, with appropriate adult supervision if required
- a window should be opened for fresh air ventilation if it is safe to do so
- if it is not possible to isolate them, move them to an area which is at least 2 metres away from other people
- if they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible - the bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else
- personal protective equipment (PPE) must be worn by staff caring for the pupil while they await collection if a distance of 2 metres cannot be maintained (such as

for a very young child or a child with complex needs) - more information on PPE use can be found in the [safe working in education, childcare and children's social care settings](#) guidance

In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with COVID-19 symptoms should not visit the GP, pharmacy, urgent care centre or a hospital, unless advised to.

If a pupil in a boarding school shows symptoms, they should initially self-isolate in their residential setting household. Most will benefit from self-isolating in their boarding house so that their usual support can continue. Others will benefit more from self-isolating in their home.

The individual should not use public transport if they are symptomatic. If arranging their return to their family home to isolate, schools should follow advice on transport arrangements in the [safe working in education, childcare and children's social care settings](#) guidance.

PHE has advised that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying COVID-19.

Further information is available on how to [manage and report confirmed cases of COVID-19 amongst the school community](#).

When an individual has had close contact with someone with COVID-19 symptoms

Any member of staff who has provided close contact care to someone with symptoms, regardless of whether they are wearing PPE, and all other members of staff or pupils who have been in close contact with that person, do not need to go home to self-isolate unless:

- the symptomatic person subsequently tests positive
- they develop symptoms themselves (in which case, they should self-isolate immediately and [arrange to have a test](#))
- they are requested to do so by NHS Test and Trace or the Public Health England (PHE) advice service (or PHE local health protection team if escalated) which is a legal obligation
- they have tested positive from an LFD or PCR test as part of a community or worker programme - if an LFD test is taken first, and a confirmatory PCR test is then taken within 2 days of the positive lateral flow test, and is negative, it overrides the LFD test and the individual can return to school

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned after they have left, to reduce the risk of passing the infection on to other people. See the guidance on the [cleaning of non-healthcare settings](#).

If you are contacted by NHS Test and Trace or your local health protection team and told to self-isolate because you have been a close contact of a positive case, you have a legal obligation to do so.