

RISK ASSESSMENT



BIRKENHEAD
SCHOOL

Location : School Campus / McAllester Field	Subject: Coronavirus Covid-19	Age group : All
Date of assessment : 3 rd March, 2021	Assessment undertaken by : MJT	Checked by : PRV

The School (Governors, leaders / managers, staff) is aware of its critical role to deliver education making the most of its resources, and to do this while taking seriously the responsibility for health, safety and welfare for its staff and for those visiting its sites – primarily the children / students. The Coronavirus outbreak poses a particular challenge – while it is not a risk created by a School’s activities, there are risks of transmission arising from any gathering of people, which the most effective approach to education naturally involves. School’s site remained open and staffed throughout the Summer Term 2020, primarily for children with one or more parents who are key/critical workers, but also through the phased return of students: procedures and approaches have been continually reviewed during this period. The School operated fully on site during the Michaelmas Term 2020 while the local area experienced varying levels of Covid-19 cases and a period of local and national restrictions. There was then a further period of “lockdown” affecting the School in early 2021, with Early Years provision operating fully, over a third of children attending Prep and lesser numbers on site of Seniors students. Education has continued online for those pupils and students not attending the School site full-time.

While the virus incubates for between 1 and 12 days before symptoms are seen, the average is 5 days. The highest likelihood of transmission occurs when an individual is symptomatic, with key symptoms for this purpose being:

- **A high temperature** – this means you feel hot to touch on your chest or back (clarified elsewhere as 37.8 degrees for adults where measured, over 38 degrees for children under 3 months old, over 39 degrees for 3-6 month olds), or...
- **A new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than normal)
- **A loss of, or change in, your normal sense of taste and smell (anosmia)**

The Wirral Director of Public Health has recently reminded people that other symptoms may be connected with Covid-19 infection including diarrhoea, persistent headache, fever / chills, difficulty breathing, fatigue, muscle or body aches, sore throat, congestion or runny nose, nausea. A test at a public “symptoms-only” testing site is recommended with these symptoms. Clearly the same symptoms may be connected with many other causes as well so the Schools risk assessment focusses on the core ones in national guidance.

Vaccines are now being administered to an ever-widening proportion of the population which should reduce the risks from infection and, it is believed, some of the risks of transmission but, at the time of writing, all systems of preventative control remain valid, vaccine or otherwise. Similarly, while variants of Covid-19 have been identified, the recommended preventative measures remain the same, with the exception of greater emphasis on wearing face coverings in classrooms where social distancing cannot be maintained, regardless of “bubble group” separation.

The virus can cause death, and has done so across the UK and world – although mostly occurring where there are underlying health factors and/or some comorbidities (which has been the case in 91% of fatalities). The risk lies across all populations although increasing research suggests very low risk for those under 19 years of age, including many who were previously thought to have considerable vulnerability. Indeed, a recent [summary \(22/02/2021\) of the evidence by the DfE](#) confirms “that the risk to children and young people [from Covid-19] is low but that the risks to [them] of being out of school are high and increase the longer restrictions on education are in force”. We are confident that the work of staff and parents in supporting our children at this time has reduced the risks arising from any non-attendance to the School site. The report further adds that “case rates within education settings have been shown to reflect those in the local community, and risks are reduced further in such a controlled environment by having appropriate mitigations and systems of control in place”..... “the risks to education staff are similar to those for most other occupations.” The [Covid-19 Schools Infection Survey](#)’s latest report from a period in December indicated 15% of teachers had tested positive for Covid-19 compared with an estimated 18.2% of the general working age population.

In terms of age, there is lower risk for those under 50 years’ old, and the threshold of 70 years’ age has been taken as indicative of a particular vulnerability (based on age alone). The virus appears to be more readily caught by men and is more serious for those with underlying health conditions – particularly those listed as “clinically extremely vulnerable” (CEV) in government guidelines, which now includes adults with Downs syndrome and those with Stage 5 kidney disease. There are a disproportionate number of people from ethnic minority populations who have experienced the virus and serious adverse outcomes. Work continues internationally on the epidemiology and the indication is that this is largely due to social factors rather than any difference directly relating to ethnicity.

The means of transmission of Covid-19 are understood to be primarily by “aerosol” – i.e. coughs / sneezes, breathing when in close contact. It is also possible for it to be transmitted if the virus is on a surface which is then touched by someone who then touches their eyes / mouth / nose, but there is less risk of such indirect “fomite” transmission.

Concerns have arisen over recent weeks following the identification of “Variant/s of Concern”. The Scientific Advisory Group (SAGE) continues to be that “current personal, procedural and environmental mitigations to reduce transmissions of SARS-CoV-2 [the source of Covid-19] should all continue to apply to the new variant. Further, while there is some evidence of an increased risk of hospitalisation and death, the absolute risk remains low (particularly for children and young people) and the “variant does not result in an appreciably different clinical course to the original strain for children and young people.”

Research continues and the government’s advice involves sector-specific guidance for retail, offices, transport, education, places of worship etc.. The Government has recently issued a document [“Covid-19 Response – Spring 2021”](#) outlining a “roadmap” towards the return of most / all activities and the reduction of many control measures in society.

The hierarchy of protection principles advised for Schools (called a “System of Controls”) advised by Public Health England is:

1. Minimising contact with those unwell by seeking to ensure that those with symptoms (or have someone in their household who have) do not attend School
2. Where recommended, the use of face coverings in schools (now recommended for us in classrooms where social distancing cannot be maintained).
3. Cleaning hands thoroughly more often than usual – ideally with soap / water for over 20 seconds – with thorough use of alcoholic hand rub / sanitiser an alternative. (upon arrival, after sneezes / coughing and before eating / handling food)
4. Good respiratory hygiene – “Catch It, Bin It, Kill It.” (Usual breathing is less likely to cause transmission). Avoid touching of mouth, eyes and nose.
5. Cleaning frequently touched surfaces.

6. Minimising contact / mixing of individuals by size of groups, room layouts and timetables – maintaining distancing where possible / practicable (in the context of delivering effective education).
7. Where necessary, wear appropriate “Personal Protective Equipment”.
8. Always keeping occupied spaces well ventilated.

We will continue to review our assessment of risk and provision of guidance, particularly surrounding those more likely to be affected by Covid-19. This includes members of staff with health factors leading them to be considered “clinically extremely vulnerable”. The strong advice from the Department of Health is that those people should either work from home (if possible) or not at all. The School recognises and supports this advice while also encouraging staff to obtain more specific advice on their own health conditions.

We are also aware that members of many Black, Asian and Minority Ethnic populations have been identified as having up to double the susceptibility to serious outcomes should they catch Covid-19. We have members of such populations in our School community – staff, students / children, parents. There is no guidance as to particular preventative measures that might be different for them other than those already in place, and the indications are that the susceptibility has more to do with social factors (e.g. job roles) than additional factors / risks requiring specific control measures. Please raise any specific risk issues with those involved in line management, pastoral care or, if necessary, directly with the Bursar or Personnel and Compliance Manager.

Notes:

Face Coverings / PPE - Early scientific advice did not recommend face coverings in educational settings due to the other control measures in effect, emphasising the need more where there is closer contact in enclosed spaces without ventilation and with a wider range of people. Personal Protective Equipment is a term best used for medical circumstances and advised for members of staff if they must be within 2 metres to care for someone displaying coronavirus symptoms, or in some cleaning scenarios.

In late August 2020, the Government updated their guidance on face coverings excluding their use in classrooms but advising them elsewhere in communal areas where social distancing cannot readily be maintained. Local lockdown measures stated that face coverings are required at School pick-up and drop-off locations. The School’s approach in light of all guidance available was for face coverings to be worn in the Seniors areas of School - indoors all the time except when in classrooms, offices and when eating or drinking. Prep staff have since adopted the same principles as the Seniors in communal areas (e.g. corridors / staff rooms). Further, the latest guidance is now that, from Year 7, face coverings should also be worn in classrooms where social distancing cannot be maintained (unless impacts on the ability to take part in exercise / strenuous activity).

Ventilation: While this has always been an important consideration, in late October 2020, the Government added consideration of ventilation formally to the system of controls to be considered by Schools. We have added window vents to some rooms where there was particularly limited ventilation and will encourage all room users to consider the right balance of heating and ventilation by windows and doors, also seeking to ensure that any measures do not lead all airborne particles past a particular chair / workstation. This continues to need to be balanced by considerations of safety – the security of buildings and the **fire prevention policy - which has primacy.**

Working from Home – the School has not currently identified any role which is equally effective when undertaken from home. While a few individual roles may be able to incorporate elements of home working, therefore, the focus will be on making the workplace Covid-safe as far as is reasonably practicable.

Moving around Site / Mixing – The School benefits from not being based in a single campus building and having many different areas for students and children to congregate, enabling healthy movement around in the open and a variety of educational experiences. To further reduce the relatively low risk, some areas of the School are currently zoned for use by particular year groups ('bubbles'), thus reducing movement and potential contact between year group 'bubbles' around the School site. In order to deliver its strong holistic education, students will still move to use the more specialised teaching locations such as Science, Art, DT, Music and Sport. To implement further restrictions when students are attending on site would unnecessarily limit the sustainable teaching and learning achieved, and existing measures are likely to be reduced further as appropriate.

Communication / Preparation – relevant approaches / procedures will be communicated effectively to staff, students / children and their families. (Particular explanation may be required to children with particular individual needs).

Hazard	Initial		
	S	L	R
List hazards – something with the potential to cause harm. R (risk rating) = S (severity) x L (likelihood)			
Overall risk arising from the presence of the virus in the community	4-5 or 2	3 4	12-15 8
Risk to children's health through transmission due to contact / poor hygiene.	2	4	8

Who might be harmed and how?
List groups of people who are at risk from identified hazards.
Difficult to specify without medical / epidemiological knowledge, but including all within the School community. (Different scores reflect the different susceptibility – government guidance still states that Covid-19 will be a mild illness for most)
Children attending site in year groups and/or key worker provision.

Control Measures / Mitigation	Residual		
	S	L	R
List controls for the identified hazards.			
<ol style="list-style-type: none"> Regular monitoring of government advice (e.g. Public Health, Foreign and Commonwealth Office, Department for Education) and communication among community when appropriate. Implementation of control measures and advice. Children/Staff classed as clinically extremely vulnerable due to pre-existing medical conditions should follow medical guidance concerning School attendance – with full consideration of guidance, medical advice and risk assessment. 	4-5 Or 2	2 2	8-10 4
<ol style="list-style-type: none"> Staff / students not to attend if symptomatic. Posters advising of preventative hygiene guidance Availability of tissues for those sneezing / coughing. Reducing the opportunities for mixed groups by “bubble group” approach to consistent groups, especially during otherwise communal times (e.g. School entrances, break times and eating locations / arrangements). Reminder on “social distancing” and other measures to staff / students Room layouts to support distancing (and/or limited face to face positioning) (e.g. rooms, desks, dinner provision, 	2	2	4

						<p>early years, access routes, reduced meetings/assemblies).</p> <ol style="list-style-type: none"> 7. Children to be advised to wash their hands on entering School, after break time / sports activities, in changing rooms, before eating and before/after use of shared transport. 8. Sports activities to be planned to maximise social distancing and limited sharing of equipment between cleaning). 9. Soap supply to be checked regularly in toilet areas. 10. Janitors to clean contact points throughout the day (e.g. handles, switches), Toilet areas and other contact points more regularly. 11. Staff to clean those locations e.g. Science etc. between lessons when used by different 'bubbles'. 12. Social isolation and tests if symptomatic person identified on site. 13. Compliance with "Test and Trace" measures for close contacts. 14. Additional "asymptomatic testing" (on site then home testing, as advised / provided by Gov't 15. Additional risk assessments of particular activities (e.g. Sport, Music, Transport, Lunch provision) 			
Risk to visitor's health while on site, particularly at gatherings of people.	4-5 or 2	3 4	12-15 8	<p>Visitors to site, particularly elderly and those with underlying health conditions</p> <p>(Different scores reflect the different susceptibility –</p>	<ol style="list-style-type: none"> 1. Minimise numbers of visits with guidance (e.g. appointments, and no congregating on "pick up"/ "drop off"). 2. Increased email / phone correspondence. 3. Hand sanitiser to be available in all reception areas (Lodge, Prep Office, Nursery) 	4-5 Or 2	1 1	4-5 2	

				government guidance still states that Covid-19 will be a mild illness for most)				
Risk to staff health while on site	4-5	3	12-15	All staff, but particularly those with underlying health conditions.	<ul style="list-style-type: none"> 4. Posters advising of preventative hygiene guidance. 5. Information communicated on current public health guidance. 	3*	3	9
					<ul style="list-style-type: none"> 1. Regular updates on health guidance – e.g. symptoms, hygiene, self-isolation, test and trace. 2. Posters advising of preventative hygiene guidance. 3. Staff should not attend work if symptomatic or “self-isolating” under NHS guidance. 4. Refer to NHS for direct guidance where appropriate (e.g. “111” or GP) 5. Those staff with clinical vulnerabilities should follow medical guidance about work and the workplace. 6. “Social distancing” encouraged across site particularly in distance between staff and children where practicable. 7. Identified “teacher area” in each classroom/lab/workshop 8. Fewer meetings – access to refreshments / break in increased locations. 9. Face Covering (with visible mouths) available where social distancing not able to be maintained). 10. Clear barriers available to assist activities where social distancing insufficient (e.g. singing, some 1:1 teaching) 11. Strict social distancing (outside or in identified location) if symptomatic person identified on site – to return home and undertake Covid-19 test as soon as practicable. 	Or 4/5	1	4-5

Risks on discovery of child / staff member with Covid-19 symptoms	3-4	3	9-12	All staff, children, families and visitors	<ol style="list-style-type: none"> 1. Staff member with symptoms to be directed to return home without contact with others (unless Nurse input required to confirm) and to follow self-isolation guidance. 2. Child/student to designated area outside Medical Centre if assessment by Nurse required. 3. If judged indicative of Covid-19 symptoms, initial assessment of likely contact, potential infected areas – quarantined / cleaned with caution (including PPE if appropriate). 4. Staff/pupil to obtain Covid-19 test as soon as practicable. 5. Test and Trace advice to be followed in terms of “bubble groups” and/or “close contacts”. 6. Staff to maintain 2m distancing from students / children where practicable (more readily in Seniors) and 2m from other adults – at work and elsewhere. 	3-4	2	6-8
Risks of further transmission on site following positive Covid-19 test	3-4	3	9-12	All staff / children with regular contact with the identified individual	<ol style="list-style-type: none"> 1. Government guidance to be followed with protocol informing relevant staff / children to be sent home (if at School) and self-isolate, obtaining test if symptomatic at any stage, and full “test and track” procedures followed. 2. Regular reminders to staff, students and parents of preventative guidance and measures. 3. Contact with local health protection team for advice / guidance. 	3-4	2	6-8

RISK RATING

S (severity)	L (likelihood)	R (risk rating) = S x L
--------------	----------------	-------------------------

<p>5 Dying or being permanently disabled 4 Serious injury / long term illness 3 Temporary disability / 3 days off sick 2 Will need medical attention 1 Minor injury e.g. bruise</p>	<p>5 Will almost certainly happen 4 Probably happen 3 Possibly happen 2 Not so likely 1 Unlikely to happen at all</p>	<p>16-25 Stop! Do not start activity until risk is controlled 10-15 High risk level. Take action straight away to control risk 6-9 Medium level risk. Tighten up controls and make a plan to do something about the risk 3-5 Fairly low risk. Low priority but keep possible action in mind 1-2 Low risk. No further action required</p>
---	---	---