



# St Peter's CE Primary & Nursery School COVID-19: Outbreak Management Plan & Risk Assessment (Updated January 22)

This plan outlines how we will manage single cases, clusters and outbreaks of COVID-19. It also provides detail on how we plan to operate if we are required to reintroduce measures/mitigations in our setting or area to prevent transmission of COVID-19 in the context of an outbreak. This includes how we would ensure that every child, pupil or student receives the quantity and quality of education and care to which they are normally entitled.

An 'outbreak' is where **two or more** test confirmed (PCR+ve) cases of COVID-19 occur that are associated with an education setting with illness onset dates within 14 days and one of the following:

- Identified direct exposure between at least two of the test-confirmed cases in that setting during the infectious period of one of the cases.
- No sustained local community transmission & the absence of an alternative source of infection outside the setting for the initially identified case.

An '**incident**' has a broader meaning and refers to events or situations which warrant investigation to determine if corrective action or specific management is needed.

Outbreaks can differ significantly in terms of numbers of cases and locations of cases within an education setting. We will continue to report any cases, clusters / outbreaks to Public Health in Shropshire Council so that they can provide us with assistance in risk assessing when we have reached the **Threshold** for initiating targeted interventions as described in the Contingency Framework for education & childcare settings & Shropshire Council's SOP for schools and early year settings (Appendix 3).

In the case of a local outbreak we will work with Shropshire Local Authority, Public Health and Public Health England Health Protection Teams. Below sets out all the possible measures/mitigations that will be considered in the case of a local outbreak. The actual measures implemented will be determined jointly and based on the specific situation. They will also balance carefully the impact on the delivery of education with the need to minimise transmission. Most importantly any measures will only ever be considered for the shortest time possible, to allow the outbreak to be managed and minimise transmission of COVID-19. In all cases measures / mitigations will only be implemented to prevent larger scale school closure.



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## Preventing school transmission

Our refreshed risk assessments include how to promote COVID-19 vaccination uptake, effective hand hygiene, cleanliness of the environment and improving ventilation where possible.

## Reporting cases and when trigger thresholds have been met

We will continue to report **all** cases, clusters and outbreaks to Shropshire Public Health as per SOP for management of cases, clusters and outbreaks in education & early years settings and will work with their health protection team to risk assess when the thresholds described in the Contingency Framework should initiate targeted interventions. We will also receive notification of positive cases from the health protection team and keep records of all confirmed cases. We will attend and contribute to incident management meetings with Shropshire Local Authority and PHE when required.

## Response to positive cases

The advice for people who have a positive lateral flow device (LFD) test result has changed (Jan 22). They are no longer required to have a follow-up polymerase chain reaction (PCR) test, and they should stay at home and self-isolate immediately.

People who have a positive LFD test result should only have a follow-up PCR test if:

- they wish to claim the [Test and Trace Support Payment](#)
- they have a health condition that means they [may be suitable for new coronavirus \(COVID-19\) treatments](#)
- they are taking LFD tests as part of research or surveillance programmes, and the programme asks them to do so
- they have a positive day 2 LFD test [after arriving in England](#)

## Reintroduction of consistent groups 'bubbles'

It may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups.

[COVID-19: epidemiological definitions of outbreaks and clusters - GOV.UK \(www.gov.uk\)](#) and [Contingency Framework: education and childcare settings](#)



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## **Reintroduction of face coverings**

Consideration will be given to whether face coverings should temporarily be worn in communal areas or classrooms (by pupils in - secondary settings only, but by staff and visitors in all school settings (unless exempt)).

Update Nov 2021- In primary schools, we recommend that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas. Health advice continues to be that children in primary schools should not be asked to wear face coverings. Face coverings do not need to be worn when outdoors.

Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. The benefits of transparent face coverings should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth. Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles. A face visor or shield may be worn in addition to a face covering but not instead of one. This is because face visors or shields do not adequately cover the nose and mouth, and do not filter airborne particles.

The use of face coverings may have an impact on those who rely on visual signals for communication. Those who communicate with or provide support to those who do, are exempt from any recommendation to wear face coverings in education and childcare settings.

No pupil or student will be denied education on the grounds of whether they are, or are not, wearing a face covering.

Reasonable adjustments will be made for disabled pupils to support them to access education successfully. Where appropriate, you should discuss with pupils and parents the types of reasonable adjustments that are being considered to support an individual.

## **Reintroduction of testing/Additional PCR testing**

Consideration will be given as to whether increased use of home testing by staff, and pupils is necessary. *We will also continue with our local recommendation that all pupils in early years and primary settings take twice weekly asymptomatic testing.*

[COVID-19: epidemiological definitions of outbreaks and clusters - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/covid-19-epidemiological-definitions-of-outbreaks-and-clusters) and [Contingency Framework: education and childcare settings](#)



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Where these measures are necessary, it will be important to work jointly with the LA and PH to identify any support required (e.g. supply of additional tests). Where onsite testing is reintroduced, we will look to do this in a way that does not negatively impact on the education for pupils.

There may also be occasions where a mobile symptomatic testing unit/service is made available on the school site and pupils are invited to take a PCR test, or additional PCR tests may be organised through other means.

## **Contact tracing / isolating**

### **Daily testing for contacts of COVID-19 (updated)**

From Tuesday 14 December, a new national approach to daily testing for contacts of COVID-19 has been introduced (including until the end of this term). All adults who are fully vaccinated and children aged 5 to 18 years and 6 months, identified as a contact of someone with COVID-19 – whether Omicron or not – should take a lateral flow device (LFD) test every day for 7 days instead of self-isolating. Daily testing by close contacts will help to slow the spread of COVID-19.

Once notified by NHS Test and Trace as a close contact, all eligible staff and pupils should take an LFD each day for 7 days and report the results through the [Online Reporting System](#) and to their school. If they test negative, they can continue to attend their education setting. Outside of the education setting, they should continue to follow the advice set out in the [Sunday 12 December press release](#). This approach should also be adopted over the winter break and on return in January.

If they test positive, they should self-isolate and [order a PCR test](#) to confirm the result. If the PCR is positive, they must self-isolate for 10 days. If the PCR test is negative, they no longer need to self-isolate but should continue to carry out the remainder of the daily tests, and only need to isolate if it is positive.

## **Other restrictions**

[COVID-19: epidemiological definitions of outbreaks and clusters - GOV.UK \(www.gov.uk\)](#) and [Contingency Framework: education and childcare settings](#)



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We may need to limit activities that require bringing parents and carers onto site (other than for drop off and pick up) e.g. open days, performances, open evenings. We may also reintroduce staggered start and finish times if not already in operation to minimise the number of people on the school site at the start and finish of the day.

We will also review any activities bringing pupils together in addition to the normal school day, or that required transportation for larger numbers of pupils (e.g. school trips / holidays - including residential educational visits). This could also include any activities bringing together pupils from a few different schools (e.g. transition/taster days).

## **Clinically Extremely Vulnerable**

Shielding is currently paused. In the event of a major outbreak or variant of concern that poses a significant risk to individuals on the shielded patient list (SPL), ministers can agree to reintroduce shielding. Shielding would be considered in addition to other measures to address the residual risk to people on the SPL, once the wider interventions are considered. Shielding can only be reintroduced by national government.

In the event of a reintroduction of shielding we would need to review staffing capacity to ensure we could continue to operate staffing in a safe manner. Any attendance reductions as a result of this would be in line with the principles below.

## **Attendance Restrictions**

As a last resort, we may need to introduce attendance restrictions. We will provide high-quality remote education for all pupils not able to attend.

Where attendance restrictions are necessary there will be an order of priority applied in terms of which pupils would continue to attend on-site provision. The only deviation to this will be where they are required to isolate (either as a result of testing positive or as a result of a local reintroduction of close contact isolation – see above).

Priority for onsite attendance will always be given to vulnerable children and young people and children of critical workers.



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In exceptional circumstances, ([special schools and alternative provision only](#)) if usual interventions and provision at adequate staffing ratios, or using staff with vital specialist training cannot be provided, we will seek to resume as close as possible to the specified provision for the child or young person as soon as possible.

In Out-of-school settings/wraparound childcare where attendance restrictions are in place, vulnerable children and young people will continue to be allowed to attend. For all other children, face-to-face provision will be provided for a limited set of essential purposes, such as going to or seeking work, attendance at a medical appointment, or to undertake education and training.

Where attendance restrictions are needed, we will be vigilant and responsive to all safeguarding threats with the aim of keeping vulnerable children and young people safe, particularly as more children and young people will be learning remotely.

If we must temporarily stop onsite provision on public health advice, we will discuss any alternative arrangements necessary for vulnerable children and young people with the local authority. Where vulnerable children and young people are absent or do not take up a place offered to them, we will:

- follow up with the parent or carer, working with the local authority and social worker (where applicable), to explore the reason for absence and discuss their concerns
- encourage the child or young person to attend educational provision, working with the local authority and social worker (where applicable), particularly where the social worker and the Virtual School Head (where applicable) agrees that the child or young person's attendance would be appropriate
- focus the discussions on the welfare of the child or young person and ensuring that the child or young person is able to access appropriate education and support while they are at home
- have in place procedures to maintain contact, ensure they can access remote education support, as required, and regularly check if they are doing so

## **Staffing Capacity**

Where staffing capacity (following use of available supply teaching capacity) is impacting on our ability to open fully we will follow the principles outlined in the attendance restrictions above.



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## Free School Meal provision

We will continue to provide free school meals support in the form of meals or lunch parcels/vouchers for pupils who are eligible for benefits related free school meals and who are not attending school because they:

- are self-isolating
- have had symptoms or a positive test result themselves

Control measures You should: 1. Ensure good hygiene for everyone. 2. Maintain appropriate cleaning regimes. 3. Keep occupied spaces well ventilated. 4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.

What are the Hazards?	Who might be harmed and how the hazard could cause harm	What are you already doing? (Existing Controls)	Risk Level Low/Med/High	What further actions are necessary	Residual Risk Level Low/Med/High	Action	
						Who	When
1 <b>Catching or spreading Coronavirus – general considerations</b>	Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable	<ul style="list-style-type: none"> <li>• Ensure suitable levels of staff are maintained</li> <li>• <b>Ensure people who are ill stay at home</b> – ensure that pupils, staff and other adults do not come into school if they have COVID-19 symptoms or have tested positive in the last 7 days.</li> <li>• <b>If anyone in the school becomes unwell with a new, continuous cough or anosmia, they must be sent home and advised to follow</b></li> </ul> <p><a href="https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance">https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance</a></p>	Low – to be reviewed by school in light of local controls		Low		



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			<ul style="list-style-type: none"><li>• Reduce the amount of people you come into contact with and maintain social distancing where possible</li><li>• Staff maintaining distance from pupils and other staff as much as possible whilst recognising that this is not always possible</li><li>• Ensure robust hand and respiratory hygiene measures are in place –</li><li>• Cleaning 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 - risk assess children who may not be able to perform this action independantly<ul style="list-style-type: none"><li>○ Ensure there are enough handwashing or sanitiser stations available</li><li>○ Supervise hand sanitiser use given risks around ingestion</li><li>○ Support younger children and those with complex needs in following routines</li></ul></li><li>• Ensuring good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach – provide aequate tissues, use lidded bins and double bagging of waste</li><li>• Additional support will need to considered for some pupils with complex needs who will struggle to maintain as good respiratory hygiene as their peers</li></ul>					
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		<ul style="list-style-type: none"><li>• Ensure enhanced cleaning arrangements are in place – use standard cleaning products, such as detergents and bleach. Ensure products have a COSHH risk assessment<ul style="list-style-type: none"><li>○ Clean frequently touched surfaces more often than usual</li><li>○ More frequent cleaning of rooms / shared areas</li><li>○ Different groups do not need to be allocated their own toilet blocks – clean toilets regularly</li></ul></li><li>• Ensure active engagement is made with the NHS Test and Trace process<ul style="list-style-type: none"><li>○ Schools must ensure they understand the NHS Test and Trace process and how to contact their local <a href="#">Public Health England health protection team</a> and how to book a test</li><li>○ Keep contact details of all visitors, staff and pupils</li><li>○ If someone tests positive, (even if they are asymptomatic) they should stay at home and follow the <a href="#">‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’</a></li></ul></li></ul> <p><a href="https://www.shropshire.gov.uk/local_outbreak_plan">https://www.shropshire.gov.uk/local_outbreak_plan</a></p>						
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			<ul style="list-style-type: none"> <li>• Keep occupied spaces well ventilated whilst maintain a comfortable teaching environment. Ventilate classrooms at break and lunch times to improve fresh air flow.</li> <li>• Monitor CO2 readings on classroom monitors and inform SLT if still high following steps to ventilate with fresh air.</li> </ul> <p>Pregnant members of Staff</p> <p>A separate pregnant member of staff risk assessment should be completed for all these staff.</p> <ul style="list-style-type: none"> <li>• Members of staff that are pregnant fall into the clinically vulnerable group identified by the NHS and schools should endeavour to support staff to work from home. Those who are pregnant are strongly advised to follow the social distancing guidance.</li> <li>• However, if pregnant members of staff cannot work from home, they should be offered the safest available on-site roles and practise social distancing. Schools will need to undertake a specific risk assessment for pregnant staff and decide whether or not such staff can safely return to the workplace.</li> <li>• The Royal College of Obstetricians &amp; Gynaecologists have produced <a href="#">guidance</a> which includes specific guidance for public facing</li> </ul>					
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			<p>roles. This advises that pregnant women who can work from home should do so. If they can't and work in a public-facing role it should be modified appropriately to minimise exposure. In particular, it places emphasis on employers undertaking a risk assessment, to determine whether women who are pregnant can continue working in public facing roles.</p> <ul style="list-style-type: none"><li>• The NHS have also provided guidance for pregnant women: <a href="https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk-from-coronavirus/pregnancy-and-coronavirus/">https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk-from-coronavirus/pregnancy-and-coronavirus/</a></li></ul> <p>and</p> <ul style="list-style-type: none"><li>• <a href="https://www.nhs.uk/start4life/pregnancy/coronavirus-covid19-advice-during-pregnancy/">https://www.nhs.uk/start4life/pregnancy/coronavirus-covid19-advice-during-pregnancy/</a></li></ul> <ul style="list-style-type: none"><li>• Review fire safety arrangements including emergency evacuation routes to maintain social distancing wherever possible.</li></ul>					
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2	<p><b>Maintaining Social Distancing where possible at School</b></p>	<p>Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable</p>	<ul style="list-style-type: none"> <li>• Ensure staff who need to move between classes and year groups, practise social distancing as much as possible, although this may not always be practical</li> <li>• Organise classrooms and other learning environments such as workshops and science labs, to maintain space between seats and desks where possible to support distancing</li> <li>• Office space - try to minimise or prevent hot desking – designate separate spaces where practicable.</li> <li>• Consider which lessons or classroom activities could take place outdoors             <ul style="list-style-type: none"> <li>○ Use the timetable and selection of classrooms or other learning environments to reduce movement around the school or building</li> </ul> </li> </ul>	<p>Low – to be reviewed by school in light of local controls</p>		Low		
3	<p><b>Reduce mixing within education or childcare settings (including supply teachers, peripatetic teachers and / or other temporary staff who may move between schools) by:</b></p>	<p>Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable</p>	<ul style="list-style-type: none"> <li>• Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual</li> <li>• Supply teachers, peripatetic teachers and other temporary staff, who move between schools, should ensure they minimise contact and maintain as much distance as possible from other staff.</li> <li>• Access rooms directly from outside where possible</li> </ul> <p><b>Use outside space:</b></p> <ul style="list-style-type: none"> <li>• For exercise and breaks</li> </ul>	<p>Low – to be reviewed by school in light of local controls</p>		Low		



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			<ul style="list-style-type: none"> <li>For outdoor education, where possible, as this can limit transmission and more easily allow for distance between children and staff</li> </ul> <p><b>For shared rooms:</b></p> <ul style="list-style-type: none"> <li>Use halls, dining areas and internal and external sports facilities for lunch and exercise.</li> <li>Stagger the use of staff rooms and offices to limit occupancy:             <ul style="list-style-type: none"> <li>Consider how the management of breaks and lunchtimes for staff who are allocated to a group, will not mix with other groups</li> <li>Organise how measures will be put in place in the staff room to allow for social distancing – access to facilities, safe space to relax and take time out</li> </ul> </li> </ul> <p><b>Reduce the use of shared resources:</b></p> <ul style="list-style-type: none"> <li>By limiting the amount of shared resources that are taken home and limit exchange of take-home resources between children, young people and staff</li> </ul> <p>By seeking to prevent the sharing of stationery and other equipment where possible. Shared materials and surfaces should be cleaned and disinfected more frequently.</p>					
4	<b>Managing Customers,</b>	Staff, pupils	<b>Contractors</b>	Low – to be		Low		



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	<b>Contractors and visitors</b>	parents, guardians, visitors, including clinically vulnerable clinically extremely vulnerable	<ul style="list-style-type: none"> <li>• Encourage visits via remote connection/working where this is an option</li> <li>• Only necessary visits to assist the running of the school, during the virus and lockdown, should be allowed in school</li> <li>• Where site visits are required, site guidance on social distancing and hygiene should be explained to visitors on or before arrival</li> <li>• Limit the number of visitors at any one time</li> <li>• Limit visitor times to a specific time window and restricting access to required visitors only</li> <li>• No visitors or contractors during drop off and pick up times</li> <li>• Determine if schedules for essential services and contractor visits can be revised to reduce interaction and overlap between people, eg. carrying out services at night.</li> <li>• <b>Maintain a record of all visitors (including contact details) to support the NHS Test and Trace process.</b></li> </ul> <p><b>Customers and Visitors-</b></p> <ul style="list-style-type: none"> <li>• Provide clear guidance on social distancing and hygiene to people on arrival, for example, signage or visual aids and before arrival, eg. by phone, on the website or by email.</li> <li>• Establish host responsibilities relating to COVID-19 and providing any necessary training for people who act as hosts for visitors.</li> <li>• Review entry and exit routes for visitors and contractors to minimise contact with other people.</li> </ul>	reviewed by school in light of local controls				
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5	<p><b>Workplace and furniture contamination</b></p>	<p>Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable</p>	<p><b>Hygiene: handwashing, sanitation facilities and toilets</b></p> <ul style="list-style-type: none"> <li>• Use signs and posters to maintain personal hygiene standards and build awareness of good handwashing technique, the need to increase handwashing frequency</li> <li>• Ensure that all adults and children:             <ul style="list-style-type: none"> <li>○ Frequently wash their hands with soap and water for 20 seconds and dry thoroughly. Review the <a href="#">guidance on hand cleaning</a></li> <li>○ Clean their hands on arrival at the setting, before and after eating, and after sneezing or coughing</li> <li>○ Are encouraged not to touch their mouth, eyes and nose</li> <li>○ Use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it')</li> </ul> </li> <li>• Ensure that sufficient handwashing facilities are available. Where a sink is not nearby, provide hand sanitiser in classrooms and other learning environments</li> <li>• Enhance cleaning for busy areas.</li> <li>• Provide more waste facilities and more frequent rubbish collection.</li> <li>• <a href="#">Provide hand drying facilities: either paper towels or hand dryers</a></li> <li>• Follow the <a href="#">COVID-19: cleaning of non-healthcare settings guidance</a></li> <li>• Clean surfaces that staff, children and young people are touching, such as toys, books, desks,</li> </ul>	<p>Low – to be reviewed by school in light of local controls</p>	<p>Low</p>			
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			<p>chairs, doors, handles, sinks, toilets, light switches, bannisters, more regularly than normal</p> <ul style="list-style-type: none"> <li>• Ensure that help is available for children and young people who have trouble cleaning their hands independently</li> <li>• Consider how to encourage young children to learn and practice these habits through games, songs and repetition</li> <li>• Ensure that lidded / pedal bins for tissues are emptied throughout the day. Ensure regular cleaning of lids</li> <li>• Where possible, all spaces should be well ventilated using natural ventilation, air conditioning units (adjusted to use fresh air only) and fans. Advice on this can be found in Health and Safety Executive guidance on <a href="#">air conditioning and ventilation during the coronavirus outbreak</a></li> <li>• Uniforms do not need to be cleaned any more often than usual, nor do they need to be cleaned using methods which are different from normal</li> </ul> <p><b>Handling goods, merchandise and other materials, and onsite vehicles if appropriate.</b></p>					
6	<b>Use of personal protective equipment (PPE) and face coverings in school settings against</b>	Staff, pupils parents, guardians, visitors, including clinically	<ul style="list-style-type: none"> <li>• <a href="https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools">https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools</a></li> <li>• <b>FACE MASKS</b> Update Jan 22- In primary schools, we recommend that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas. Health advice continues to be</li> </ul>	Low – to be reviewed by school in light of local/		Low		





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	<p><b>COVID -19</b></p>	<p>extremely vulnerable</p>	<p>that children in primary schools should not be asked to wear face coverings. Face coverings do not need to be worn when outdoors.</p> <ul style="list-style-type: none"> <li>• Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. The benefits of transparent face coverings should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth. Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles. A face visor or shield may be worn in addition to a face covering but not instead of one. This is because face visors or shields do not adequately cover the nose and mouth, and do not filter airborne particles.</li> <li>• <b>The majority of staff in education settings will not require PPE beyond what they would normally need for their work</b>, even if they are not always able to maintain social distancing. PPE is only needed in a very small number of cases including:             <ul style="list-style-type: none"> <li>○ Children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way</li> </ul> </li> </ul>	<p>national controls</p>				
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			<ul style="list-style-type: none"> <li>○ If a child, young person or other learner becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. 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 a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn</li> </ul> <p>Education, childcare and children's social care settings and providers should use their local supply chains to obtain PPE.</p>					
8	<b>First aid</b>	Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable	<p>In emergencies, social distancing should be observed if possible, but this may not always be possible. As a minimum, consider the following:</p> <ul style="list-style-type: none"> <li>• Review the number of first aiders, fire marshals and Evac chair operators required if the building occupancy and use has changed. Additional measures may be required implemented in view of staff shortages.</li> <li>• Training will be required for any additional equipment used under the changing</li> </ul>	Low – to be reviewed by school in light of local controls		Low		



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			<p>circumstances. First Aiders must be aware of the new protocols with regard to Covid19</p> <ul style="list-style-type: none"><li>• PEEPS (Personal Emergency Evacuation Plan) – may need reviewing for disabled people/people with assistance dogs/use of lifts due to changes in social distancing or evacuation routes.</li><li>• Ensure adequate first aid and associated provision is made at all times</li><li>• Ensure adequate PPE if provided for use of staff in all emergencies including first aid and fire</li><li>• Provide all necessary means of cleaning equipment following any type of emergency</li><li>• All occasions when CPR is required this will be carried out in accordance with current protocols from the Resuscitation Council the F/A needs assessment will identify any additional equipment and training needs</li><li>• Where there is a possible risk of infection all necessary precautions must be followed face, and eye protection and contact with the casualties' airway must be avoided. Chest compressions and defibrillations must be applied while waiting for the ambulance and advance lifesaving care</li><li>• For a paediatric casualty – There is an acceptance that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child. The advice from the Resuscitation Council (UK) is</li></ul>					
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			<p>that rescue breaths should be undertaken as ventilations are crucial to the child's chances of survival</p> <ul style="list-style-type: none"> <li>• First aiders need additional support and training in use of additional PPE if close contact with a patient is required. E.g. changes to EAV/CPR due to Covid 19.</li> <li>• Additional measures may be required/implemented in view of staff shortages.</li> </ul>					
9	<b>Accidents\ incidents</b>	Staff, pupils parents, guardians, visitors, including clinically extremely vulnerable	<ul style="list-style-type: none"> <li>• Normal reporting to various parties e.g. Reporting to Governors / Trustees / Local Authority.</li> <li>• Reporting of COVID-19 cases to Health &amp; Safety Team. (RIDDOR 2013 requirements for HSE reporting) <a href="#">on-line reporting form</a></li> <li>• Consider looking at high risk activities to minimise the potential for accidents and the need for staff to assist children\students</li> </ul>	Low – to be reviewed by school in light of local controls		Low		
10	<b>Emotional distress of the staff - including anxiety</b>	Staff, pupils, including clinically extremely vulnerable	<ul style="list-style-type: none"> <li>• At least one SLT member of staff on site every day for staff to share concerns with</li> <li>• Open door policy</li> <li>• Appoint mental health first aiders to support staff</li> <li>• Staff to be included with the decision making, risk assessments</li> <li>• Review staff work and rest rooms to ensure social distancing can be adhered to</li> <li>• Staff should be provided with an allocated space such as staff room or alternative rooms where they can go for break times. A safe space for staff to relax and rest between sessions should be made available.</li> </ul>	Low – to be reviewed by school in light of local controls		Low		



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	<b>Emotional distress of the pupils</b>		<ul style="list-style-type: none"> <li>• Staff break and lunchtimes must be rotated into the school day</li> <li>• Make details of counselling available to staff e.g. <a href="https://schooladvice.co.uk/schools-advisory-service/">https://schooladvice.co.uk/schools-advisory-service/</a></li> <li>• Referral to Occupational Health for clarity on circumstances someone in school should be working under depending on health</li> <li>• Staff to have access to a designated member of staff to address concerns with. Where possible work place adaptations should be considered to support staff member</li> <li>• Pupils to be supported by staff</li> <li>• Look at ways of being able to support a child if in need of comfort.</li> <li>• SEN pupils - review assessments to be able to further assist pupils who will not understand the changes</li> </ul>					
11	<b>Transport arrangements</b>  <b>Wider public transport</b>	<b>Staff, pupils</b>  parents, guardians, visitors, including clinically extremely vulnerable	<b>Staff, parents and children:</b> <ul style="list-style-type: none"> <li>• Encourage parents, staff and children and young people to walk or cycle to their education setting where possible</li> <li>• Make sure schools, parents and young people are aware of the <u>Coronavirus (COVID-19): safer travel guidance for passengers</u> when planning their travel</li> <li>• Take appropriate actions to reduce risk if hygiene rules and social distancing are not possible, for example when transporting children</li> </ul>	Low – to be reviewed by school in light of local controls		Low		



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			<p>and young people with complex needs who need support to access the vehicle or fasten seatbelts</p> <p><b>Receiving deliveries of goods:</b></p> <ul style="list-style-type: none"> <li>• Minimise unnecessary contact with staff and delivery staff for example non-contact deliveries where the nature of the product allows for use of electronic pre-booking</li> <li>• Order larger quantities of inbound materials less often to reduce deliveries</li> <li>• Where possible and safe, having single employees load or unload vehicles</li> <li>• Where possible, using the same pairs of people for loads where more than one is needed</li> <li>• Encourage drivers to stay in their vehicles where this does not compromise their safety and existing safe working practice, such as preventing drive-aways</li> <li>• Cleaning procedures for equipment, tools and vehicles after each shift and after each use of shared equipment, for example pallet trucks and trolleys</li> <li>• Nearby supply of hand sanitiser for employees to use handling deliveries when handwashing is not practical</li> <li>• Regular cleaning of reusable delivery boxes</li> </ul>					
12	Use of car park for cars, and	Staff, pupils parents, guardians,	<ul style="list-style-type: none"> <li>• Car parking/spacing of cars for staff</li> </ul>	Low – to be reviewed by school		Low		



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	<b>other forms of transport</b>	visitors, including clinically extremely vulnerable		in light of local controls				
14	<b>Consultation and communication</b>	Staff, pupils parents, guardians, visitors including clinically extremely vulnerable	<p>Ensure the risk assessment is updated in line with the current guidance and there is consultation with staff and trade unions on the control measures (updated 29th Nov 21)</p> <p>Certain measures will also need to be shared with parents eg. reintroduction of face masks (Nov 21)</p> <p>Provide regular updates in the school newsletter relating to changes in government guidance.</p> <p>Promote the vaccination programme in the local community.</p>	Low – to be reviewed by school in light of local controls		Low		