Risk Assessment Method

In order to evaluate the risk level associated to a hazard, two factors need to be considered:-

1) the likelihood of the outcome to occur

How likely is it that the hazard will be realized and result in harm? Five categories are defined: -

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| **1** | **Very Unlikely** |
| **2** | **Unlikely** |
| **3** | **Fairly Likely** |
| **4** | **Likely** |
| **5** | **Very Likely** |

2) the possible Consequence of the outcome

Realistically, what is the worst likely outcome? This method defines five categories of Consequence: -

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| **1** | **Insignificant – No injury** |
| **2** | **Minor – minor injuries needing first aid** |
| **3** | **Moderate – up to three days absence** |
| **4** | **Major – more than seven days absence** |
| **5** | **Catastrophic – Fatality or permanent Disability** |

Once those two factors are assessed, the matrix on the next page can be used to determine the level of risk. Measure the Likelihood (L) X the Consequence (C) which will give the school a numerical score. Using the table the school can convert this score into a qualitative value for example (L) fairly likely X (C) Major = 12 = Medium Risk Level

This information will then be used to prioritise any control measures necessary to eliminate or reduce the risk to an acceptable level.

Risk Assessment Method (continuing).

**Matrix**

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|  |
| **Consequence** |
| **Catastrophic** | **5** | **10** | **15** | **20** | **25** |
| **Major** | **4** | **8** | **12** | **16** | **20** |
| **Moderate** | **3** | **6** | **9** | **12** | **15** |
| **Minor** | **2** | **4** | **6** | **8** | **10** |
| **Insignificant** | **1** | **2** | **3** | **4** | **5** |
| **Likelihood** | **Very Unlikely** | **Unlikely** | **Fairly Likely** | **Likely** | **Very Likely** |

**Action Level**

|  |  |
| --- | --- |
| **20-25 VERY HIGH** | **Unacceptable risk - immediate action required** |
| **10-16 HIGH** | **Risk reduction required - high priority** |
| **4-9 MEDIUM** | **Medium risk - action required so far as is reasonably practicable** |
| **2-3 LOW** | **Low priority - further risk reduction may not be feasible or cost effective** |
| **1 Very Low** | **Low risk - no further action required** |

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| **Service**: | **Location**: | **Assessment Completed by**: |
| **Description of Activity/Task Assessed**:  Full opening of schools during Covid-19 | **Date of Assessment**: | **Review Date**: |

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| **Introduction and Instruction**  The Department for Education and Health Security Agency have issued revised guidance to schools following the further easing of Covid restrictions, to assist schools with managing new arrangements the Health and Safety Team has produced the following Risk Assessment Template for schools to adapt to their specific setting.  The Risk Assessment must be reviewed by Head Teachers point by point and where actions are implemented, they must be reworded to show how the controls have been applied.  Where points are not completed but will need to be addressed, they should be placed in the Further Actions Required column with a time frame for completion. Items that are not applicable to the school’s specific settings should be deleted. | | | | | | | | | | | | | |
| Government guidance updated from the 16th of August 2021states: From 16 August, you will not be required to self-isolate if you are a close contact of someone with COVID-19 and any of the following apply:   * you are fully vaccinated * you are below the age of 18 years 6 months * you have taken part in or are currently part of an approved COVID-19 vaccine trial * you are not able to get vaccinated for medical reasons   Instead of self-isolating, those who are fully vaccinated and under 18s identified as close contacts of positive coronavirus cases are advised to get a free PCR test as soon as possible.  If NHS Test and Trace contact an individual who has been in contact with a person who has had a positive test result for the Omicron variant, they must self-isolate for at least 7 days and get a PCR test as soon as possible regardless of age or vaccination status.  Employees who have tested positive with Covid  (no matter which variant) can now [stop self-isolating](https://www.gov.uk/government/news/self-isolation-for-covid-19-cases-reduced-from-10-to-7-days-following-negative-lfd-tests) on day 7, provided they do not have a high temperature (above 37.8˚C), and they have tested negative on day 6 of isolation and again 24 hours later on day 7.  If both these tests are negative, employees can stop self-isolating on day 7.  If the lateral flow test on day 6 or day 7 are positive, the employee must continue to self-isolate.  Re-tests should be done on day 8 and day 9 - employees can stop isolation on day 9 if both tests are negative and they do not have a high temperature.  Employees should register all their lateral flow results on the Government website [here](https://www.gov.uk/report-covid19-result).  Anyone leaving self-isolation should continue to work from home if possible and limit close contact with other people in crowded or poorly ventilated spaces, or at higher risk of severe illness.  Where staff are required to do front line work they should follow the risk control measures that are in place for their team, including regular testing and wearing PPE. [Self-isolation for COVID-19 cases reduced from 10 to 7 days following negative LFD tests - GOV.UK (www.gov.uk)](https://www.gov.uk/government/news/self-isolation-for-covid-19-cases-reduced-from-10-to-7-days-following-negative-lfd-tests)  **Staff members who have been identified as having had close contact with a positive case should in addition to arranging for a PCR test, take an LFD test every day for 7 days if they continue to attend work** (e.g., they are exempt from self-isolation due to being double vaccinated). If at any time the staff member becomes symptomatic, they must stay at home and arrange for a PCR test immediately (regardless of having already had a negative PCR test result).  **Students (from reception age or above) or staff who lives with someone who has tested positive for COVID-19**, should in addition to arranging a PCR test also take an LFD test every day for 7 days while they continue to attend school or work – testing should start from when the first person in the home tests positive as household transmission is very likely to happen. If at any time the student or staff member becomes symptomatic, they must stay at home and arrange for a PCR test immediately (regardless of having already had a negative PCR test result).  **Increasing lateral flow testing – NEW LOCAL GUIDANCE FOR PRIMARY**  Lateral flow device (LFD) testing is now recommended to children under the age of 12 and should be used as a preventative measure in the outbreak management response for primary schools starting from reception age (4 years old). This means, if a school reaches the threshold for activating their outbreak management plan, or there has been two or more cases within the class, all children within the class (or consistent group) should be asked to take a LFD test as soon as it is possible to do so – and repeat the LFD test 3 days later. Families should still arrange for a PCR test.  If there has only been a single case within a class, and the school have identified very close contacts to the positive case (e.g., only a small number of students have been identified such as those sitting at the same table), the school should ask the very close contacts to take an LFD test as soon as it is possible to do so – and repeat the LFD test 3 days later. PCR testing for the very close contacts would also still be advised  Primary schools should encourage families to pick up a lateral flow testing kit from a local pharmacy or library but do also have the option of ordering additional lateral flow kits to the school. Some schools may wish to order additional testing kits to hand out to those families whom they think are less likely to collect one.  **Increasing lateral flow testing – NEW LOCAL GUIDANCE FOR SECONDARY**  Secondary students who are identified as close contacts to a positive case, should in addition to arranging a PCR test, take a lateral flow device (LFD) test every day for 7 days while they continue to attend school. If at any time the student becomes symptomatic, they must stay at home and arrange for a PCR test immediately (regardless of having already had a negative PCR test result).  Children aged under five years old are not required to take a test unless the positive case is within their household.  Fully vaccinated means that you have received your final dose of an MHRA- approved COVID-19 vaccine in the UK vaccination programme at least 14 days prior to contact with a positive case.  Anyone who tests positive following the PCR test will still be legally required to self-isolate, irrespective of their vaccination status or age in order to break onward chains of transmission. Meanwhile anyone who develops COVID-19 symptoms should self-isolate and get a PCR test and remain in isolation until the result comes back. | | | | | | | | | | | | | |
| **Self-isolation and shielding**  All clinically extremely vulnerable (CEV) children and young people should attend their education setting unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their clinician or other specialist not to attend.  Further information is available in the guidance on [supporting pupils at school with medical conditions](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3).  You should ensure that key contractors are aware of the school’s control measures and ways of working. | | | | | | | | | | | | | |
| **No** | **What is the Hazard?**  (i.e. potential causes of injury/damage) | **Who might be harmed** | **How might people be harmed?** | **Existing Risk Control Measures** | **Risk Rating \*** | | | **Additional Controls** | **Residual Risk Rating** | | | **Action monitored by whom?** | **Action Completed by When?** |
| **L** | **C** | **R** | **L** | **C** | **R** |
|  | **Section 1 - Prevention** | | | | | | | | | | | | |
| **1** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school  When an individual develops coronavirus (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 coronavirus (COVID-19) symptoms * they are required to quarantine having recently visited countries outside the   Common Travel Area   * they have had a positive test   They must immediately cease to attend and not attend for at least 7 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 test   (Whether this was a Lateral Flow Device (LFD) or Polymerase Chain Reaction  (PCR) test)  If anyone in the 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), the school:   * must send them home to begin isolation - the isolation period includes the day   the symptoms started and the next 7 full days   * advise them to follow the [guidance for households with possible or confirmed](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection)   [coronavirus (COVID-19)](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection)  infection   * advise them to arrange to have a PCR test as soon as possible to see if they have Covid 19 * They should also take an LFT every day for seven days   Employees who have tested positive with Covid  (no matter which variant) can now [stop self-isolating](https://www.gov.uk/government/news/self-isolation-for-covid-19-cases-reduced-from-10-to-7-days-following-negative-lfd-tests) on day 7, provided they do not have a high temperature (above 37.8˚C), and they have tested negative on day 6 of isolation and again 24 hours later on day 7.  If both these tests are negative, employees can stop self-isolating on day 7.  If the lateral flow test on day 6 or day 7 are positive, the employee must continue to self-isolate.  Re-tests should be done on day 8 and day 9 - employees can stop isolation on day 9 if both tests are negative and they do not have a high temperature.  Employees should register all their lateral flow results on the Government website [here](https://www.gov.uk/report-covid19-result).  Anyone leaving self-isolation should continue to work from home if possible and limit close contact with other people in crowded or poorly ventilated spaces, or at higher risk of severe illness.  Where staff are required to do front line work they should follow the risk control measures that are in place for their team, including regular testing and wearing PPE. [Self-isolation for COVID-19 cases reduced from 10 to 7 days following negative LFD tests - GOV.UK (www.gov.uk)](https://www.gov.uk/government/news/self-isolation-for-covid-19-cases-reduced-from-10-to-7-days-following-negative-lfd-tests)  Employers should call the Self-Isolation Service Hub on 020 3743 6715 as soon as they are made aware that any of their workers have tested positive.  Employers will need to provide the 8-digit NHS Test and Trace Account ID (sometimes referred to as a CTAS number) of the person who tested positive, alongside the names of co-workers identified as close contacts. This will ensure that all workplace contacts are registered with NHS Test and Trace and can receive the necessary public health advice, including the support available to help people to self-isolate where required.   * From 16 August, you will not be required to self-isolate if you are a close contact of someone with COVID-19 and any of the following apply: * you are fully vaccinated (and at least two weeks have passed since your final dose) * you are below the age of 18 years 6 months * you have taken part in or are currently part of an approved COVID-19 vaccine trial * you are not able to get vaccinated for medical reasons.   Instead of self-isolating, those who are fully vaccinated and under 18s identified as close contacts of positive coronavirus cases are advised to get a free PCR test as soon as possible. In addition to arranging for a PCR test, take an LFD test every day for 7 days if they continue to attend work.  Those who are aged 4 or younger are not required to take a test unless the positive case is within their household.  If NHS Test and Trace contact an individual who has been in contact with a person who has had a positive test result for the Omicron variant, they must self-isolate for 10 days and get a PCR test as soon as possible regardless of age or vaccination status |  |  |  |  |  |  |  |  |  |
| **2** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **if a pupil displays coronavirus (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.  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 the young child or a child with complex needs) – more information on PPE use can be found in the [safe working in education,](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe)   [childcare and children’s social care settings guidance.](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe)  In an emergency, call 999 if someone is seriously ill or injured or their life is at risk.  Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy,  urgent care centre or a hospital, unless advised to.  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](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe)  [settings guidance.](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe) |  |  |  |  |  |  |  |  |  |
| **3** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **When an individual has had close contact with someone with coronavirus**  **(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:   * 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) * they have tested positive from an LFD test as part of a community or worker programme   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.](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings)  If an individual is contacted by NHS Test and Trace or the school local health protection team and told to self-isolate because they have been a close contact of a positive case, they have a legal obligation to do so.  All identified close contacts are now required to take a PCR test and inform the setting of the result. I**n addition to arranging for a PCR test, take an LFD test every day for 7 days if they continue to attend work**  Close contacts are defined as  **Direct contact:**  • Anyone who lives in the same household as a case  • Anyone who has had face to face contact with a case, for any length of time, including being coughed on or talked to  • Anyone who has been within 1 metre of a case for one minute or longer  **Proximity contact:**  • Anyone who has been within two meters of a case for more than 15 minutes  • Anyone who has travelled in a small vehicle with a case  Contacts of contacts do not need to self-isolate. This means that household members of students or staff that are self-isolating because they are contacts of a case do not need to self-isolate themselves. |  |  |  |  |  |  |  |  |  |
| **4** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | Face coverings should be worn in communal areas in all settings by staff, visitors and pupils or students in year 7 and above, unless they are exempt. Pupils or students (in year 7 or above) should continue to wear face coverings on public and dedicated school transport, unless they are exempt.  If you have an outbreak in your school, a director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils’ staff and visitors, unless exempt). You should make sure your outbreak management plans cover this possibility. |  |  |  |  |  |  |  |  |  |
| **5** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Ensure everyone is advised to clean their hands thoroughly and more often than usual**  Coronavirus (COVID-19) is an easy virus to kill when it is on skin. This can be done  with soap and water or hand sanitiser. The school must ensure that pupils clean their hands regularly, including:   * when they arrive at the school * when they return from breaks * when they change rooms * before and after eating   Consider how often pupils and staff will need to wash their hands and incorporate  time for this in timetables or lesson plans.  Staff working with pupils who spit uncontrollably may want more opportunities to wash their hands than other staff.  Pupils who use saliva as a sensory stimulant or who struggle with ‘catch it, bin it, kill  it’ may also need more opportunities to wash their hands.  Continue to help pupils with complex needs to clean their hands properly.  Frequent and thorough hand cleaning should now be regular practice. The school should  consider:   * whether the school have enough hand washing or hand sanitiser stations available so that all pupils and staff can clean their hands regularly * if the school need to supervise hand sanitiser use given the risks around ingestion – appropriate skin friendly skin cleaning wipes can be used as an alternative * building these routines into school culture, supported by behaviour expectations and helping ensure younger pupils and those with complex needs understand the need to follow them |  |  |  |  |  |  |  |  |  |

\*Risk Rating is calculated by multiplying the (L)Likelihood by the (C) Consequence using the matrix at the end of this document

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| **No** | **What is the Hazard?**  (i.e. potential causes of injury/damage) | **Who might be harmed** | **How might people be harmed?** | **Existing Risk Control Measures** | **Risk Rating** | | | **Additional Controls** | **Residual Risk Rating** | | | **Action monitored by whom?** | **Action Completed by When?** |
| **L** | **C** | **R** | **L** | **C** | **R** |
| **6** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Ensure good respiratory hygiene for everyone by promoting the ‘catch it, bin it, kill it’ approach**  The ‘catch it, bin it, kill it’ approach continues to be very important. Ensure  enough tissues and bins are available to support pupils and staff to follow this routine. As with hand cleaning, ensure the younger pupils and those with complex needs are helped to get this right, and all pupils understand that this is now part of how the setting operates. [The e-Bug coronavirus (COVID-19) website](https://e-bug.eu/eng_home.aspx?cc=eng&ss=1&t=Information%20about%20the%20Coronavirus) contains free resources for schools, including materials to encourage good hand and respiratory hygiene.  Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and the staff working with them and is not a reason to deny these pupils face-to-face education. |  |  |  |  |  |  |  |  |  |
| **7** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Maintain enhanced cleaning, including cleaning frequently**  **touched surfaces often, using standard products, such as**  **detergents**  In line with the risk assessment and timetabling of the day, put in place and maintain an enhanced cleaning schedule. This should include:   * more frequent cleaning of rooms or shared areas that are used by different groups * frequently touched surfaces being cleaned more often than normal * cleaning toilets regularly * encouraging pupils to wash their hands thoroughly after using the toilet * if the school site allows it, allocating different groups their own toilet blocks   PHE has published [guidance on the cleaning of non-healthcare settings](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings). This contains advice on the general cleaning required in addition to the existing advice on cleaning when there is a suspected case. |  |  |  |  |  |  |  |  |  |
| **8** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Keep occupied spaces well ventilated**  Good ventilation reduces the concentration of the virus in the air, which reduces the  risk from airborne transmission. This happens when people breathe in small particles  (aerosols) in the air after someone with the virus has occupied an enclosed area.  When the school is in operation, it is important to ensure it is well ventilated and a  comfortable teaching environment is maintained.  These can be achieved by a variety of measures including:   * mechanical ventilation systems – these should be adjusted to increase the   ventilation rate wherever possible and checked to confirm that normal  operation meets current guidance and that only fresh outside air is circulated.  If possible, systems should be adjusted to full fresh air or, if not, then systems  should be operated as normal as long as they are within a single room and  supplemented by an outdoor air supply   * natural ventilation – opening windows (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). Opening internal doors  can also assist with creating a throughput of air   * natural ventilation – if necessary external opening doors may also be used (as   long as they are not fire doors and where safe to do so)  To balance the need for increased ventilation while maintaining a comfortable  temperature, consider:   * opening high level windows in colder weather in preference to low level to reduce draughts * increasing the ventilation while spaces are unoccupied (for example, between   classes, during break and lunch, when a room is unused)   * providing flexibility to allow additional, suitable indoor clothing – for more   information see school uniform   * rearranging furniture where possible to avoid direct draughts   Heating should be used as necessary to ensure comfort levels are maintained  particularly in occupied spaces.  The Health and Safety Executive have provided guidance for assessing the adequacy of ventilation in your work environment [Link](https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation/index.htm)  If schools have concerns regarding ventilation systems or specific areas in their buildings, they can contact the Corporate Landlord. The Corporate Landlord employs M&E specialists who will be able to give them advice and support regarding ventilation. |  |  |  |  |  |  |  |  |  |
|  | Section 2 - System of controls - response to any infection | | | | | | | | | | | | |
| **9** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Promote and engage with the NHS Test and Trace process**  Staff members, parents and carers will need to:   * book a test if they or their child has symptoms - the main symptoms are: * a high temperature * a new continuous cough * a loss or change to your sense of smell or taste * self-isolate immediately and not come to school if: * they develop symptoms * they are required to do so having recently travelled from certain other countries * they have been advised to isolate by NHS test and trace or the PHE local health protection team, which is a legal obligation * provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace |  |  |  |  |  |  |  |  |  |
| **10** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Manage confirmed cases of coronavirus (COVID-19) amongst the school community**  The school must take swift action when the school becomes aware that someone who has attended has tested positive for coronavirus (COVID-19) having developed symptoms and taken a PCR test outside of school.  **If any of your staff test positive**  Employers should call the Self-Isolation Service Hub on 020 3743 6715 as soon as they are made aware that any of their workers have tested positive.  Employers will need to provide the 8-digit NHS Test and Trace Account ID (sometimes referred to as a CTAS number) of the person who tested positive, alongside the names of co-workers identified as close contacts. This will ensure that all workplace contacts are registered with NHS Test and Trace and can receive the necessary public health advice, including the support available to help people to self-isolate where required.  The school can access support on the action it should take to respond to a positive case,  by contacting the dedicated advice service introduced by Public Health England (PHE) and delivered by the NHS Business Services Authority. This can be reached  by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice. Alternatively the school can contact Haringey Public Health [publichealth@haringey.gov.uk](mailto:publichealth@haringey.gov.uk)  The advice service (or PHE local health protection team if escalated) will work with  the school to guide them through the actions needed to be taken. Based on their advice, the school must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate immediately and for the next 10 full days counting from the day after contact with the individual who tested positive.  All identified close contacts are now required to take a PCR test and inform the setting of the result.  Close contacts are defined as  **Direct contact:**  • Anyone who lives in the same household as a case  • Anyone who has had face to face contact with a case, for any length of time, including being coughed on or talked to  • Anyone who has been within 1 metre of a case for one minute or longer  **Proximity contact:**  • Anyone who has been within two meters of a case for more than 15 minutes  • Anyone who has travelled in a small vehicle with a case  Contacts of contacts do not need to self-isolate. This means that household members of students or staff that are self-isolating because they are contacts of a case do not need to self-isolate themselves.  The advice service (or PHE local health protection team if escalated) will provide  advice on who must be sent home. To support them in doing so, it is recommended the school keep a record of pupils and staff in each group, and any close contact that takes  places between pupils and staff in different groups. This should be a proportionate recording  process. The school do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome.  Where individuals are self-isolating and are within the definition of vulnerable, it is  important that schools put systems in place to keep in contact with them, offer  pastoral support, and check they are able to access education support.  A template letter will be provided to the school, on the advice of the health protection team, to send to parents and staff if needed. The school must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.  From 16 August, you will not be required to self-isolate if you are a close contact of someone with COVID-19 and any of the following apply:   * you are fully vaccinated * you are below the age of 18 years 6 months * you have taken part in or are currently part of an approved COVID-19 vaccine trial * you are not able to get vaccinated for medical reasons   If NHS Test and Trace contact an individual who has been in contact with a person who has had a positive test result for the Omicron variant, they must self-isolate for 10 days and get a PCR test as soon as possible regardless of age or vaccination status |  |  |  |  |  |  |  |  |  |
| **11** | Infection of Covid-19 Virus | Staff, Students Visitors, contractors. | Ill health, possible long term health effects, possible fatality | **Contain any outbreak by following PHE local health protection team advice**  If the school have 2 or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, the school may have an outbreak.  The school should call the dedicated advice service who will escalate the issue to the school local health protection team where necessary and advise if any additional action is  required. The school can reach them by calling the DfE Helpline on 0800 046 8687 and  selecting option 1 for advice on the action to take in response to a positive case.  In some cases, health protection teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure. This could be the class or year group.  DfE guidance presents thresholds that should trigger the setting to undertake an additional assessment and seek advice as necessary. Thresholds are described as:  • 5 cases or 10% (whichever is reached first) test-confirmed cases of COVID19 (either PCR testing or LFD Ag testing with follow-up PCR) within 10 days, among students or staff clustered in a **consistent group or cohort**. Dates should be calculated based on illness onset, or test date if asymptomatic  Or  • Evidence of severe of illness e.g. students or staff members admitted to hospital or a death as a result of a COVID–19 infection (PCR or LFD Ag with follow up PCR) as the setting may require advice on risk assessment and communication.  If risk assessment by a public health professional indicates transmission is occurring in the setting further control measures may be advised, including the following:  • Reintroduction of face coverings.  • Additional asymptomatic LFD testing, including reinstating onsite testing.  • Advice to anyone (staff or pupil) who is known be at increased risk of severe infection.  • Other proportionate measures as necessary, seeking to maintain face to face education if is safe to do so. For example, reducing crowding through temporarily suspending assemblies or other events that bring larger groups together.  If the school are implementing the system of controls, addressing any issues the school have identified and therefore reducing transmission risks, whole site closure will not  generally, be necessary. The school should not close except on the advice of health  protection teams. |  |  |  |  |  |  |  |  |  |