
KAT

**Operational Risk Assessment for ATAM Academy, Khalsa
Secondary Academy, The Khalsa Academy
Wolverhampton:**

COVID-19: Operational risk assessment for school reopening

Please note: this risk assessment should be undertaken in conjunction with the guidance on school reopening issued by the Department for Education on

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

Assessment conducted by:		Job title:	Principal	Covered by this assessment	Staff, pupils, contractors, visitors, volunteers
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Date of assessment:	20/08/2021	Review interval:	As guidance changes	Date of next review:	As guidance changes
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Related documents	
Trust/Local Authority documents:	Government guidance: COVID-19: cleaning in non-healthcare settings https://www.publichealth.hscni.net/sites/default/files/2021-01/School%20information%20pack%20on%20managing%20covid%20in%20the%20school%20setting.docx

Risk matrix

Risk rating High (H), Medium (M), Low (L)		Likelihood of occurrence		
		Probable	Possible	Remote
Likely impact	Major: Causes major physical injury, harm or ill-health.	H	H	H
	Severe: Causes physical injury or illness requiring first aid.	H	M	L
	Minor: Causes physical or emotional discomfort.	M	L	L

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
1. Establishing a systematic process of partial opening, including social distancing					
1.1 Governance and policy					
Trustees and governors are not fully informed or involved in making key decisions	H	<ul style="list-style-type: none"> Online meetings have been held regularly with Trustees and governors. The Trust Board and the LAB are involved in key decisions on reopening. Trustees and Governors are briefed regularly on the latest government guidance and its implications for the school. 	Y	<ul style="list-style-type: none"> All plans have been approved by the Trust Board. 	L
1.2 Policy review					
Existing policies on safeguarding, health and safety, fire evacuation, medical, behaviour, attendance and other policies may no longer be fit for purpose in the current circumstances	H	<ul style="list-style-type: none"> All relevant policies have been reviewed and revised where appropriate to take account of government guidance on COVID-19 and its implications for the school. Staff, pupils and parents have been briefed as necessary. 	Y	<ul style="list-style-type: none"> All necessary Addendums and RA have been updated. All updates have been checked by the Trust Board. 	L
1.3 Communication strategy					
Key stakeholders are not fully informed about changes to policies and procedures due to COVID-19, resulting in risks to health	H	<ul style="list-style-type: none"> Communications strategies for the following groups are in place: <ul style="list-style-type: none"> Staff Pupils Parents Governors/Trustees Local Authority Regional Schools Commissioner, as appropriate Professional associations, as appropriate Other partners, as appropriate 	Y	<ul style="list-style-type: none"> All communication strategies are in place. 	L
1.4 Risk assessments					

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
Risks are not comprehensively assessed in every area of the school in light of COVID-19, leading to breaches of social distancing and hygiene guidance.	H	<ul style="list-style-type: none"> All appropriate risk assessments are updated as necessary s and mitigation strategies are put in place and communicated to staff covering: <ul style="list-style-type: none"> Different areas of the school When students will enter and leave school Students' movement around school Arrangements during break and lunch times, if appropriate Delivering aspects of the curriculum, especially for practical subjects and where shared equipment is used 	Y	<ul style="list-style-type: none"> All plans are confirmed and in place. 	L
2. Investing in safety equipment and health and safety arrangements to limit the spread of COVID-19					
2.1 Cleaning					
General principles of cleaning during the COVID-19 pandemic	H	<ul style="list-style-type: none"> Cleaning and disinfection Regular cleaning plays a vital role in limiting the transmission of COVID-19. Reducing clutter and removing difficult to clean items can make cleaning easier. Increase the frequency of cleaning, using standard cleaning products such as detergents and bleach, paying attention to all surfaces but especially ones that are touched frequently, such as door handles, light switches, work surfaces, remote controls and electronic devices. As a minimum, frequently touched surfaces should be wiped down twice a day, and one of these should be at the beginning or the end of the working day. Cleaning should be more frequent depending on the number of people using the space, whether they are entering and exiting the setting and access to handwashing and hand-sanitising facilities. Cleaning of frequently touched surfaces is particularly important in bathrooms and communal kitchens. When cleaning surfaces, it is not necessary to wear personal protective equipment (PPE) or clothing over and above what would usually be used. 	Y	<ul style="list-style-type: none"> Additional day time cleaner put in place 	L

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
<p>Principles of cleaning after an individual with symptoms of, or confirmed, COVID-19 has left the setting or area</p>		<p>Personal protective equipment (PPE)</p> <ul style="list-style-type: none"> The minimum PPE to be worn for cleaning an area after a person with symptoms of COVID-19, or confirmed COVID-19, has left the setting, is disposable gloves and an apron. Wash hands with soap and water for 20 seconds after all PPE has been removed. If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where someone unwell has spent the night such as in a hotel room or boarding school dormitory) then additional PPE to protect the cleaner's eyes, mouth and nose may be necessary. The local Public Health England (PHE) Health Protection Team can advise on this. <p>Cleaning and disinfection</p> <ul style="list-style-type: none"> Public areas where a symptomatic person has passed through and spent minimal time but which are not visibly contaminated with body fluids, such as corridors, can be cleaned thoroughly as normal. All surfaces that the symptomatic person has come into contact with should be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as bathrooms, door handles, telephones, grab rails in corridors and stairwells. Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction. Use one of the options below: <ul style="list-style-type: none"> a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm av.cl.) or a household detergent followed by disinfection (1,000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants or if an alternative disinfectant is used within the organisation ensure that it is effective against enveloped viruses Avoid mixing cleaning products together as this can create toxic fumes. Avoid creating splashes and spray when cleaning. Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined in the waste section below. 	Y	<ul style="list-style-type: none"> PPE ordered for use of cleaning contaminated areas only. Guidance shared with cleaning company and site staff responsible for cleaning area. 	M

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
		<ul style="list-style-type: none"> • When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used. • Laundry • Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items. To minimise the possibility of dispersing virus through the air, do not shake dirty laundry prior to washing. • Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above. • Waste • Personal waste from individuals with symptoms of COVID-19 and waste from cleaning of areas where they have been (including PPE, disposable cloths and used tissues): • Should be put in a plastic rubbish bag and tied when full • The plastic bag should then be placed in a second bin bag and tied • This should be put in a suitable and secure place and marked for storage until the individual's test results are known • This waste should be stored safely and kept away from children. It should not be placed in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours. • If the individual tests negative, this can be disposed of immediately with the normal waste. • If COVID-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste. • If during an emergency you need to remove the waste before 72 hours, it must be treated as Category B infectious waste. You must: <ul style="list-style-type: none"> • keep it separate from your other waste • arrange for collection by a specialist contractor as hazardous waste • There will be a charge for this service. • Other household waste can be disposed of as normal. 			

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
Kitchens and communal canteens	H	<ul style="list-style-type: none"> It is very unlikely that COVID-19 is transmitted through food. However, as a matter of good hygiene practice, anyone handling food should wash their hands often with soap and water for at least 20 seconds before doing so. Crockery and eating utensils should not be shared. Clean frequently touched surfaces regularly. Food business operators should continue to follow the Food Standard Agency's (FSA) guidance on good hygiene practices in food preparation, Hazard Analysis and Critical Control Point (HACCP) processes, and preventative practices (pre-requisite programmes (PRPs)). 	Y	<ul style="list-style-type: none"> Guidance shared with Kitchen staff 	L
Bathrooms	H	<ul style="list-style-type: none"> Clean frequently touched surfaces regularly. Ensure suitable hand washing facilities are available including running water, liquid soap and paper towels or hand driers. Where cloth towels are used, these should be for individual use and laundered in accordance with washing instructions. 	Y	<ul style="list-style-type: none"> Additional day time cleaner put in place 	L
Waste	M	<ul style="list-style-type: none"> Waste does not need to be segregated unless an individual in the setting shows symptoms of or tests positive for COVID-19. Dispose of routine waste as normal, placing any used cloths or wipes in 'black bag' waste bins. You do not need to put them in an extra bag or store them for a time before throwing them away. 	Y	<ul style="list-style-type: none"> Site staff informed 	L
2.2 Hygiene and handwashing					
Inadequate supplies of soap and hand sanitiser mean that pupils and staff do not wash their hands with sufficient frequency	H	<ul style="list-style-type: none"> Monitoring arrangements are in place to ensure that supplies of soap, hand towels and sanitiser are maintained throughout the day. 	Y	<ul style="list-style-type: none"> Supplies have been checked by site staff. 	L

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
Pupils forget to wash their hands regularly and frequently	H	<ul style="list-style-type: none"> Staff training includes the need to remind students of the need to wash their hands regularly and thoroughly. Posters and electronic messaging boards reinforce the need to wash hands regularly and frequently. School leaders monitor the extent to which handwashing is taking place on a regular basis. 	Y	<ul style="list-style-type: none"> Poster and electronic messages are already in place. 	L
2.3 Engage with the NHS Test and Trace process					
Testing and tracing		<ul style="list-style-type: none"> Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. As with positive cases in any other setting, NHS Test and Trace will work with the positive case to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. 	Y	<ul style="list-style-type: none"> A school covid team is still in place to assist with close contact and queries. 	L
Test result	H	<ul style="list-style-type: none"> From 16 August 2021, children under the age of 18 years old will no longer be required to self-isolate if they are contacted by NHS Test and Trace as a close contact of a positive COVID-19 case. Instead, children will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so. 	Y	<ul style="list-style-type: none"> This is managed by the Covid Team in school 	M
Manage confirmed cases of coronavirus		<ul style="list-style-type: none"> 18-year-olds will be treated in the same way as children until 4 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact. 	Y	<ul style="list-style-type: none"> Covid Team will action, monitor and record patterns. 	M

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
		<ul style="list-style-type: none"> Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures. 			
Asymptomatic testing		<ul style="list-style-type: none"> School has a separate Risk Assessment in place 	Y	<ul style="list-style-type: none"> School test centre RA in place 	M
Contingency planning for outbreaks		<ul style="list-style-type: none"> Managing coronavirus (COVID-19) in education and childcare settings - GOV.UK (www.gov.uk) School outbreak management plan 	y	<ul style="list-style-type: none"> Covid Team to work with the Local Authority and PH Team. 	M
Testing is not used effectively to help manage staffing levels and support staff wellbeing	H	<ul style="list-style-type: none"> Guidance on getting tested has been published. The guidance has been explained to staff as part of the induction process. Post-testing support is available for staff through the school's health provider. 	y	<ul style="list-style-type: none"> Antibody testing information has been provided to staff. Information regarding Rapid testing facility for Asymptomatic pupils or staff has been shared. 	M

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
<p>Infection transmission within school due to staff/pupils (or members of their household) displaying symptoms</p>	<p>H</p>	<ul style="list-style-type: none"> • Settings only needed to do contact tracing up to and including 18 July. Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. • As with positive cases in any other setting, NHS Test and Trace will work with the positive case to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. • From 16 August 2021, children under the age of 18 years old will no longer be required to self-isolate if they are contacted by NHS Test and Trace as a close contact of a positive COVID-19 case. • Instead, children will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so. • 18-year-olds will be treated in the same way as children until 4 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact. • Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures. • Face coverings Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas. • The government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school or college. • In circumstances where face coverings are recommended 	<p>Y</p>	<ul style="list-style-type: none"> • Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing 	<p>L</p>

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
		<p>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.</p> <ul style="list-style-type: none"> • In these circumstances, transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. 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. • The main benefit from a transparent face covering is that they can aid communication, for example enabling lip-reading or allowing for the full visibility of facial expressions, but this 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 visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately. • The use of face coverings may have a particular 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. • You have a duty to make reasonable adjustments 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. • No pupil or student should be denied education on the grounds of whether they are, or are not, wearing a face covering. • Stepping measures up and down 			

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
		<p>You should have outbreak management plans outlining how you would operate if there were an outbreak in your school or local area. Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools should only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible.</p> <ul style="list-style-type: none"> • Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission. • If you have several confirmed cases within 14 days, you may have an outbreak. • You should call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if any additional action is required, such as implementing elements of your outbreak management plan. You 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. • the contingency framework describes the principles of managing local outbreaks of COVID-19 in education and childcare settings. Local authorities, directors of public health (DsPH) and PHE health protection teams (HPTs) can recommend measures described in the contingency framework in individual education and childcare settings – or a small cluster of settings – as part of their outbreak management responsibilities. 		<ul style="list-style-type: none"> • See outbreak Management plan for the school. 	
Staff, pupils and parents are not aware of the school's procedures (including on self-isolation and testing) should anyone display symptoms of COVID-19	H	<ul style="list-style-type: none"> • Staff, pupils and parents have received clear communications informing them of current government guidance on the actions to take should anyone display symptoms of COVID-19 and how this will be implemented in the school. • This guidance has been explained to staff and pupils as part of the induction process. • Any updates or changes to this guidance are communicated in a timely and effective way to all stakeholders. 	Y	<ul style="list-style-type: none"> • All stakeholders have received timely communication regarding school procedures. 	L
Staff, pupils and parents are not aware of the school's procedures should	H	<ul style="list-style-type: none"> • Staff, pupils and parents have received clear communications informing them of current government guidance on confirmed cases of COVID-19 and how this will be implemented in the school. 	Y	<ul style="list-style-type: none"> • A refresher will be included in staff inset and pupil induction days. 	L

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there be a confirmed case of COVID-19 in the school		<ul style="list-style-type: none"> This guidance has been explained to staff and pupils as part of the induction process. Any updates or changes to this guidance are communicated in a timely and effective way to all stakeholders. 		<ul style="list-style-type: none"> All guidance has been issued to parents by letter. 	
2.4 Communication with parents					
Parents and carers are not fully informed of the health and safety requirements for the reopening of the school	M	<ul style="list-style-type: none"> As part of the overall communications strategy referenced in 1.12, parents are kept up to date with information, guidance and the school's expectations on a regular basis using a range of communication tools. COVID-19 specific letters and information are placed on the school website. 	Y	<ul style="list-style-type: none"> Parents are kept up to date via parent mail, the school website and social media. Letters and emails have been sent to parents and staff. 	L
Parents and carers may not fully understand their responsibilities should a child show symptoms of COVID-19	H	<ul style="list-style-type: none"> Key messages in line with government guidance are reinforced on a regular basis via parent mail, the school website and social media. 	Y	<ul style="list-style-type: none"> Parents are kept up to date via parent mail, the school website and social media. Letters and emails have been sent to parents and staff. 	L
2.5 Personal Protective Equipment (PPE)					
Use of PPE	H	<ul style="list-style-type: none"> Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the use of PPE in education, childcare and children's social care settings provides more information on the use of PPE for COVID-19. 	Y	<ul style="list-style-type: none"> A small supply of PPE is kept in school for cleaning isolated room where infectious pupil's may be held whilst waiting for collection. 	L
Use of face coverings in schools	H	<ul style="list-style-type: none"> Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas. The government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school or college. 	Y	<ul style="list-style-type: none"> Communicated to all stakeholders 	L

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
<p>In circumstances where face coverings are recommended</p>	<p>M</p>	<ul style="list-style-type: none"> • If you have a substantial increase in the number of positive cases in your school (see Stepping measures up and down section for more information), 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 contingency plans cover this possibility. • In these circumstances, transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. 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. • The main benefit from a transparent face covering is that they can aid communication, for example enabling lip-reading or allowing for the full visibility of facial expressions, but this 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 visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately. • The use of face coverings may have a particular 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. 	<p>Y</p>	<ul style="list-style-type: none"> • Follow COVID Outbreak Management Plan 	<p>L</p>

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		<ul style="list-style-type: none"> You have a duty to make reasonable adjustments 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. No pupil or student should be denied education on the grounds of whether they are, or are not, wearing a face covering. 			
3. Maximising social distancing measures					
3.1 Transport –					
Public transport		<ul style="list-style-type: none"> The government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school or college. 		<ul style="list-style-type: none"> Students and staff informed 	
5. Enhancing mental health support for pupils and staff					
4.1 Mental health concerns – pupils					
Pupils' mental health has been adversely affected during the period that the school has been closed and by the COVID-19 crisis in general	H	<ul style="list-style-type: none"> There are sufficient numbers of trained staff available to support pupils with mental health issues. There is access to designated staff for all pupils who wish to talk to someone about wellbeing/mental health. Wellbeing/mental health is discussed regularly in PSHE/virtual assembly's/pupil briefings. Resources/websites to support the mental health of pupils are provided. 	Y	<ul style="list-style-type: none"> Mental Health First Aiders x 2 Mental Health helpline (KAT wide) Student Welfare Manager. Resources provided to parents. Wellbeing checks on vulnerable groups and their families. Pastoral checks on families. Positive participation campaign as part of the Wolverhampton LA project around Mental Health. Hemraj Goyal Foundation PD workshops planned regularly for the year ahead. (TKAW/ ATAM) 	L
4.2 Mental health concerns – staff					

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
The mental health of staff has been adversely affected during the period that the school has been closed and by the COVID-19 crisis in general	H	<ul style="list-style-type: none"> Staff are encouraged to focus on their wellbeing. Line managers are proactive in discussing wellbeing with the staff that they manage, including their workload. Staff briefings and training have included content on wellbeing. Staff briefings/training on wellbeing are provided. Staff have been signposted to useful websites and resources. Well being meetings with the wellbeing committee take place each half term. 	Y	<ul style="list-style-type: none"> All these plans are in place. 	L
4.3 Bereavement support					
Pupils and staff are grieving because of loss of friends or family	M	<ul style="list-style-type: none"> The school has access to trained staff who can deliver bereavement counselling and support. Support is requested from other organisations when necessary. 	Y	<ul style="list-style-type: none"> The school employs a trained Counsellor. 	L
5. Operational issues					
5.1 Review of fire procedures					
Fire procedures are not appropriate to cover new arrangements	H	<ul style="list-style-type: none"> Fire procedures have been reviewed and revised where required, due to: <ul style="list-style-type: none"> Reduced numbers of pupils/staff Possible absence of fire marshals Social distancing rules during evacuation and at muster points Possible need for additional muster point(s) to enable social distancing where possible 	Y	<ul style="list-style-type: none"> Staff will be briefed prior to the return of students. Pupils will be briefed on the first day back. All staff are fire marshal trained 	L
Staff childcare issues	H	<ul style="list-style-type: none"> For COVID related childcare, where a member of staff has to provide care to their child who has been instructed to self-isolate for up to 10 days 	Y	<ul style="list-style-type: none"> See staff policy for special leave 	L
5.2 Managing premises on reopening after lengthy closure					

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
occupied spaces well ventilated	H	<ul style="list-style-type: none"> When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained. You should identify any poorly ventilated spaces as part of your risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where visitors such as parents are on site, for example, school plays. Mechanical ventilation is a system that uses a fan to draw fresh air or extract air from a room. 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 this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply. Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations. Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). You should balance the need for increased ventilation while maintaining a comfortable temperature. The Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic and CIBSE COVID-19 advice provides more information. 	Y	<ul style="list-style-type: none"> All BMS time schedules are reviewed to ensure system is on when occupied 	L
Statutory compliance has not been completed due to the availability of contractors during lockdown	H	<ul style="list-style-type: none"> All statutory compliance is up to date. Where water systems have not been maintained throughout lockdown, chlorination, flushing and certification by a specialist contractor has been done. 	Y	<ul style="list-style-type: none"> Weekly and daily checks have been taking place as part of normal Health and safety procedures and are checked during a monthly H&S audit. 	L
5.3 Contractors working on the school site					

Areas for concern	Risk rating prior to action (H/M/L)	Control measures	In place ? (Yes/No)	Further action/comments	Residual risk rating (H/M/L)
6. Finance					
6.1 Costs of the school's response to COVID-19					
The costs of additional measures and enhanced services to address COVID-19 when reopening places the school in financial difficulties	M	<ul style="list-style-type: none"> Additional cost pressures due to COVID-19 identified and an end-of-year forecast which factors them in has been produced. Trust finance team has been consulted to identify potential savings in order to work towards a balanced budget. Additional COVID-19 related costs are under monitoring and options for reducing costs over time and as guidance changes are under review. Additional sources of income are under exploration. The school's projected financial position has been shared with the Trust Board. 	Y	<ul style="list-style-type: none"> Trust FD has factored these considerations into their budget and forecast. 	L
7. Governance					
7.1 Oversight of the governing body					
Lack of governor oversight during the COVID-19 crisis leads to the school failing to meet statutory requirements.	H	<ul style="list-style-type: none"> The Trust Board continues to meet regularly via online platforms. The Trust Board's agendas are structured to ensure all statutory requirements are discussed and school leaders are held to account for their implementation. The Headteacher's report to the Trust Board includes content and updates on how the school is continuing to meet its statutory obligations in addition to covering the school's response to COVID-19. Regular dialogue with the CEO and those Trustees with designated responsibilities is in place. Minutes of Trust Board meetings are reviewed to ensure that they accurately record Trustees' oversight and holding leaders to account for areas of statutory responsibility. 	Y	<ul style="list-style-type: none"> All met 	L
8. Additional site-specific issues and risks					
Settings to add any site-specific issues/arrangements here and ensure mitigation strategies are in place to address them					

