



Dartmoor
MULTI ACADEMY TRUST

Establishment name:
Tavistock College



Initial Assessment

Review

Following Incident

Date of Initial Assessment: **01/09/2020**

Assessor(s): **SJO and JHW**

Date of Review: **30/11/2021**

Assessor(s): **PRU**

Activity/Task/Process/Equipment

COVID-19 2021. Amendments following Omicron variant announcements - November 30 2021 Review V3

(NB Other risk assessment findings and policy arrangements apply where unaffected by COVID-19)

Summary of changes:

- **Compulsory for face coverings to be worn in communal areas by staff and students.**
- **Recommendation that students wear face coverings in classrooms.**
- **Face coverings to still be worn on college buses and taxis.**
- Year group communities and staggered recess time arrangements remain removed (as of September 2021)
- Reinstatement of a one way system across the college site.
- Face to face meetings can operate at faculty and year team level where social distancing can occur.
- Whole staff briefings can still occur in the hall given the short timespan and ability to adequately socially distance. Minutes will be sent via email.
- Whole staff meetings to be held remotely or in small disaggregated groups e.g. staff voice groups.
- Face to face assemblies to be paused with virtual options utilised instead.
- Extra-curricular programme to re-commence in full as per faculty risk assessments.

Summary of hierarchy of controls:

- Ensure good hygiene (hand and respiratory) for everyone (on arrival, before food, after washroom visit, on entry/exit to rooms).
- Maintain appropriate enhanced cleaning regimes (with staff to support the cleaning of hard surfaces after each lesson).
- Keep occupied spaces well ventilated.
- Follow current public health advice on testing, self-isolation and managing confirmed cases of COVID-19.
- Follow current public health advice and maintain safety protocols on public and school transport.
- All staff and students wear face coverings in communal areas and when moving inside the school. Permit the voluntary wearing of face coverings in school classrooms.
- Maintain recommendation of common layouts for all classrooms, except specialist spaces, with all desks (one desk for two students) arranged in rows and forward facing space maximized between them.
- All classrooms (including specialist spaces) will have a strict seating plan: Students must sit in the seat they are allocated, and only that seat, and these seating plans will be recorded centrally to support effective and speedy liaison with Test & Trace if required.
- Limit unnecessary sharing of equipment, with risk assessments for curriculum areas where equipment must be shared to identify compensating hygiene controls.
- Continuing to undertake some events virtually.
- Maintaining vigilance and ensuring that all staff enforce expectations, and routinely seek the cooperation expected of all families
- Weekly staff asymptomatic testing (home testing) to continue for staff and students (twice weekly).
- Monitor and isolate all who have symptoms – maintain quarantine arrangements, cooperate with PHE (testing, track and trace)
- Continue to protect the vulnerable/highly vulnerable in line with national guidance and by local risk assessment
- Enhanced cleaning regime remains in place.
- Face coverings to be worn for bus/taxi travel
- School discipline: policy amended to account for those who disrupt/endorse fellow students/staff.

Significant hazard	Who/what is at Risk?	Risk			Control measures in place
		L	S	R	
1. Essential premises services to keep school open	Staff, students	>1	5	>5	<ul style="list-style-type: none"> ▪ Essential site maintenance will continue as normal and as determined by the timetable established on the Every system (Activities module) ▪ Every system used to monitor essential site maintenance: Compliance module can be scrutinised to identify gaps in maintenance provision.

<p>Injuries or ill-health arising from failure to maintain the building. Examples include: legionella contamination, CO production, failure to raise alarm in event of fire etc.</p>					<ul style="list-style-type: none"> ▪ Annual H&S Review process will also monitor ▪ Contractors entering site will do so by appointment and will abide by hygiene controls and work to 1m plus social distancing rules.
<p>2. Staff or students with symptoms</p> <p>Potential for contracting COVID-19 via direct or indirect contact with someone displaying symptoms</p>	<p>Staff, students</p>	<p>2</p>	<p>4</p>	<p>8</p>	<ul style="list-style-type: none"> • See ‘COVID-19 Outbreak Management Plan 2021- 2022’ for more detail and links to current guidance from respective HM Government Departments. • Staff, students and parents and carers are reminded of the symptoms of COVID-19 through letters home and via our ‘COVID-19 Outbreak Management Plan 2021-2022’. • No staff or students to attend if they have symptoms – i.e., those who display symptoms of one or more of the following: New and continuous cough; high temperature (>37.8°C); loss of or change to sense of smell/taste. • Staff and students who are symptomatic must arrange for a PCR test. Whilst awaiting PCR results, students/staff continue isolating. • If the PCR test is negative, and if they are not showing COVID-19 symptoms, students/staff can return to school. • If the PCR test is positive, the student/staff member must isolate for the required period, i.e., for 10 days from the date of the test.
<p>3. Staff or students with symptoms (noticed in school): Potential for others to contract COVID-19 via direct or indirect contact with someone displaying symptoms.</p>	<p>Staff and students. Community transmission. Disruption to face-to face education for students.</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • Students with symptoms to wait in an isolation room until collected by parents/ carers. • Those displaying symptoms are to cover their mouth/nose with a face covering until they can leave. • Stocks of tissue, hand-sanitiser, and cleaner-sanitiser to be located in this room. PPE also to be to hand for use by staff assisting this person if this is unavoidable (see First Aid section). • The room must then be cleaned in line with guidance.

					<ul style="list-style-type: none"> • If visual contamination is evident in the room e.g., saliva on surfaces etc., then PPE in the form of gloves, apron, respirator to be worn for clean. Contaminated area to be pre-treated with sanitiser.
<p>4 Staff or students testing positive for COVID-19:</p> <p>Potential for others to contract COVID-19 via direct or indirect contact with someone displaying symptoms.</p>	<p>Staff and students. Community transmission. Disruption to face-to-face education for students.</p>	1	4	4	<p>See 'COVID-19 Outbreak Management Plan 2021- 2022' for more detail and links to current guidance.</p> <ul style="list-style-type: none"> • Staff and parents/carers inform College if the PCR test is positive, but contacts in school will only be traced by NHS Test & Trace: who will work with either the positive case — or in the case of children — the parents, carers or guardian, to identify close contacts. • Contacts will not be required to self-isolate if they are: fully vaccinated (i.e., 'double-jabbed'), or below the age of 18 years and 6 months. Instead, they can continue to attend school and 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. (Contacts will not need to self-isolate while awaiting the results of the PCR test.) • All other people identified as close contacts, i.e., adults aged 18 years and 6 months or over who have not been fully vaccinated, will be required to self-isolate in line with public health guidance.
<p>5. Asymptomatic transmission</p> <p>Potential for contracting COVID-19 via direct or indirect contact with someone NOT displaying symptoms</p>	<p>Staff, students</p>	1	4	4	<ul style="list-style-type: none"> • Staff and students to maintain twice weekly LFD testing, in line with Government guidance. LFD test kits will be regularly distributed to students by the college. • All individuals who have been identified as a close contact of a suspected or confirmed case of the Omicron variant of COVID-19, irrespective of vaccination status and age, will be contacted directly and required to self-isolate immediately and asked to book a PCR test. They will be informed by the local health protection team or NHS Test and Trace if they fall into this category and provided details about self-isolation.

<p>6. Shielding the vulnerable</p> <p>Potential for contracting COVID-19 via direct or indirect contact whilst attending school site with elevated consequence</p>	<p>Staff, students, co-habitants of staff/students</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • ‘Shielding’ remains paused and can only be reinstated by HM Government. We will adhere to national guidance on shielding, as a minimum, which applies to those on the shielded patient list. This means that whilst CEV students and staff should strictly follow the same guidance as everyone else and attend school, individuals are advised to consider any additional precautions they may wish to take. • Rigorously apply organisational and structural controls as outlined in the ‘Summary of hierarchy of controls’, along with those outlined in our ‘COVID-19 Outbreak Management Plan 2021-2022’. • Arrangements agreed with vulnerable members of staff to receive winter flu and COVID-19 booster vaccinations when available. • Review individual risk assessments with CEV and other vulnerable staff to discuss additional protection if there is a ‘high or sustained increased risk of coronavirus transmission’. • If shielding is reinstated or advised by DsPH and/or SWHPT, students on the shielded patient list may be required to learn remotely, staff on the shielded patient list may be required to work from home. • Expectant mothers on our staff will have risks assessments as normal. Where a significant H&S risk is identified, measures will be implemented to ensure workplace safety. (Some pregnant workers will be at greater risk of severe illness from coronavirus.) • Risk assessments completed for students with EHCP and IHCP (to identify additional control measures where necessary to control the risks to the individual) are subject to regular review (process is led by the SENDCo).
<p>7. Social distancing</p> <p>Potential for contracting COVID-19 via direct contact whilst attending school site</p>	<p>Staff, students</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • Whilst social distancing rules (2m or 1m with mitigations) are lifted, all staff and students should continue to consider the risks of close contact with others, particularly for CEV or not yet fully vaccinated. • As per our ‘COVID-19 Outbreak Management Plan 2021-2022’, more stringent social distancing requirements may be invoked if necessary to control outbreaks, on the advice of Directors of Public Health.

Students:

- Seating plans to be maintained by all teachers and to be available via Class Charts.
- 1 way system reinstated to facilitate movement around the college. Communication via HoY in assembly and tutors reinforcing these expectations.
- Population density will mean that students will not be able to maintain social distancing upon a full return. Nevertheless, students should be as far apart as they can be and all teaching rooms organised to avoid wherever physically possible any direct face to face positioning with seating in rows, facing the front.
- Year group communities are no longer in operation.
- No mass congregation to minimise inter-mixing of year groups. Therefore assemblies will be delivered by remote means or through adequate spacing in the Sports Hall if 1 off events are required.
- As teaching spaces will be used by different year groups, the compensating control to prevent indirect transmission is that hand-hygiene will be undertaken by all upon entering and leaving a teaching space. This will be augmented by having cleaning resources within the room to clean down as required on an ongoing basis. ‘Touch points’ (table-tops, keyboards, door handles etc) to be sanitised between class changes. Teaching staff to take responsibility for their own teaching space during the day.
- Students should be self-sufficient in terms of basic equipment: all equipment used every day i.e. pens, rulers etc to be brought from home and to be for that student’s personal use only.
- Specialist curriculum risk assessments undertaken to identify activities and control measures which are consistent with government guidance.
- Students will be invited to attend and leave school in their PE kit on days when they have those timetabled lessons (PE and performing arts). This removes the need for large gatherings in the changing rooms and this will remain in place whilst we are an ‘enhanced response zone’.

- Where the sharing of equipment cannot be avoided, specific curriculum risk assessment to be undertaken to identify compensating hygiene controls. This could be sanitising items or quarantining them for 48 hours (72 hours for hard surface items like plastic, metal etc).

Staff:

- Teaching staff should maintain a social distance of 2m *wherever they can* to allow for the cross over between year groups of teaching staff.
- 1 way system reinstated to facilitate movement around the college.
- There should be **no contact of less than 2m for more than 15 minutes.**
- Where the demands of classroom teaching require movement within the 2m limit, there should be **no contact of less than 1m for more than 1 minute.** Face shields and face coverings to be worn in these instances.
- There should be **no direct face to face contact within 1m for anytime.** Assist students by looking over their shoulder or remain side by side.
- Where physical meetings take place, staff should endeavour to space out by 2m. This rule to extend to meetings within faculty staff spaces and also staff downtime.
- Regardless of wearing this mask, the following distancing measures should still be maintained
- Individual risk assessments should be completed for pupils who require 1:1 support where close proximity (see above definition) contact cannot be avoided. The assessment must consider the specific needs of the child as well as the staff member supporting them. PPE needs for staff should be identified here.
- 1:1 support staff to limit direct face to face contact as far as is practicable by positioning side to side.
- This specific risk assessment should identify additional PPE (face shield, disposable medical mask) taking into account the needs of the child and the member of staff.

Visitors:

- Only visits that are absolutely necessary are permitted. Only visits with a prior appointment and negative LFD test will be made. Parents and ad-hoc visitors must not be granted access and reception should remain 'closed'. Signs should be displayed with a telephone number or email for essential appointments to be made.
- Meetings should take place outside of school hours - only possible exceptions are core group meetings such as social workers, Ed Psych, SEND.
- Where reception remains unprotected, a reception screen is installed to protect reception staff.
- A meeting room is set up to allow meetings with an advanced appointment to take place in accordance with 2m social distancing.
- Contractors who must attend for essential maintenance must follow hygiene practices and must maintain the 2m rule wherever they can, as with staff. Wherever practicable (and as is consistent with safeguarding protocols), they must be left alone in the room where their work can be undertaken (e.g. plant room etc).

Food provision:

- HACCP reviewed by kitchen managers to control any additional COVID-19 risk areas in food production.
- No shared cutlery/crockery to be used - menu choices designed around that concept.
- Hand sanitising ahead of food collection (hand sanitiser at front of refectory queue)
- One-way system to be maintained in dining hall to speed up food access and to reduce corridor congestion
- Biometric reader to be sanitised with wipe after each use.
- Dining Hall area cleaned and sanitised between sittings.

<p>8. Hygiene</p> <p>Potential for contracting COVID-19 via indirect contact whilst attending school site</p>	<p>Staff, adult co-habitants of students</p>	<p>1</p>	<p>4</p>	<p>4</p>	<p><u>Hand-hygiene:</u></p> <ul style="list-style-type: none"> ● Ongoing regular hand-hygiene is a principal control for indirect transmission, as such hand washing or hand sanitising with alcohol hand sanitiser will be undertaken at the following times: Upon arrival at Tutor base at day’s start; After using a washroom; Before and after consuming food; Upon entering and leaving any teaching space; After using any shared resource; After coming in from outside recreation; Upon final departure. ● Hand-sanitiser is available at the entrance(s) to each teaching space and at entrance/exit points. ● Regular checks of sanitizer stations and washrooms undertaken to ensure that stocks (including of soap) are available. ● Message to be reinforced by ‘Controls’ posters displayed around the site, including in every classroom. ● Staff to sanitise hands after handling students’ work. ● Staff should encourage student hand sanitising at every opportunity. ● Regular checks of washrooms must be undertaken to ensure that stocks of soap etc are available. ● All visitors wash/sanitise their hands upon arrival and departure. <p><u>Respiratory hygiene:</u></p> <ul style="list-style-type: none"> ▪ Good respiratory hygiene – ‘Catch it, Bin it, Kill it’ to be followed and modelled as much as possible. ▪ Tissues and covered bins to be provided in each room ▪ Face masks to be worn by all staff and students in communal areas and indoor teaching spaces. ▪ <i>Behaviours to be taught and modelled at all ages.</i> ▪ Message to be reinforced by posters displayed around the site ▪ Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers. This should be considered in student specific risk assessments in order to support these pupils and the staff working with them. <p>9</p>
--	--	----------	----------	----------	--

<p>9. First Aid: Potential for contracting or spreading COVID-19 via indirect contact with individual whilst administering first aid.</p>	<p>First aid staff</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • If people report to First Aid with COVID-19 symptoms, beyond testing temperature if needed, they should NOT be treated by First Aid but rather moved to the dedicated isolation room (set aside for this eventuality), until collected to be taken home. They should cover their mouths with a tissue/paper towel (provided). ▪ First Aid staff not to be from vulnerable or highly vulnerable groups. • A contactless thermometer is available to take a temperature; PPE will nevertheless be worn. • The medical face mask to be replaced with a FFP2/N95 respirator if the person displays symptoms and approaching them is unavoidable. The first control measure is not to approach the person with symptoms if at all possible. • Disposable gloves should be worn. • Designated first aid room in place - clear protocol around any suspected Covid cases staying on the ground floor space, social distancing and wearing a face covering at all times.
<p>10. Incorrect use of PPE</p>	<p>Staff using PPE</p>	<p>1</p>	<p>4</p>	<p>4</p>	<ul style="list-style-type: none"> • PPE can be a flawed control measure if used incorrectly. It relies on good fit and correct usage and can itself become contaminated. When wearing PPE staff will avoid prolonged close, face-to-face contact as the 1st choice control measure. As such, PPE for the purposes of infection control in the form of gloves, face masks/respirators and face shields must be used with caution. • If disposable gloves are worn, change them frequently by removing them from the wrist and continue to wash your hands. • PPE face masks/respirators must be removed by the earpieces/ties, avoiding touching the front of the mask/respirator. • Face shields must be removed by the back of the securing band, avoiding touching the front of the shield. • Staff must always wash hands after removing PPE.

<p>11. Lack of adequate ventilation: Potential for contracting COVID-19 via direct contact due to poor ventilation.</p>	<p>Staff and students. Community transmission. Disruption to face-to-face education for students.</p>	1	4	4	<ul style="list-style-type: none"> ● Occupied teaching spaces to be ventilated by opening windows where a comfortable/ reasonable temperature can be maintained. ● Doors into room can be propped open when the room is occupied but teaching staff must close these when the room is unoccupied. ● Air handling units and other mechanical ventilation systems should be used where they are available (it should be ensured that these systems are not set to air recirculation only). ● Re-circulating only air-con systems will not be used in place of open windows and fresh ventilation, but can be where fresh air is provided. ● Source of fresh air to be maintained in winter months when weather is colder whilst maintaining statutory minimum temperatures by: Opening all windows by a small amount; Opening doors to aid cross ventilation (subject to controls for fire doors above); 'Flushing' rooms at break times by opening all windows to fullest extent for 2 minutes. ● CO2 monitors that have been provided by the DfE/govt to be utilised in a variety of classrooms. Clear guidance issued by Estates manager in relation to these monitors. (Note a very limited number of these had been received by the school as of 31/10/21)
<p>12. Cleaning (daily)</p>	<p>Staff and students. Community transmission. Disruption to face-to-face education for students.</p>	1	4	4	<ul style="list-style-type: none"> ▪ Demands of whole school opening in combination of reduced national risk means all rooms utilised in the timetable should be cleaned daily. ▪ Reduction in displays around rooms to limit clutter and potential for trapped dirt to gather. ▪ Clear desk policy: staff to clear hard surfaces to allow for cleaning. ▪ A combined cleaner-disinfectant to be used which is BSEN1276 compliant. ▪ Launder cloths daily or use disposable paper towels/rolls. ▪ Cleaning protocol circulated which reflects specific chemicals used at Tavistock College. Regularly touched hard-surfaces to be sanitised: tables, desk tops, light switches, keyboards/mouse, phones, taps, flush handles.

					<ul style="list-style-type: none"> ▪ Roving cleaning staff throughout day to clean regularly touched corridor surfaces (door handles, bannisters etc) ▪ Staff to support cleaning after each lesson change; touch points (table-tops, keyboards, etc) to be sanitised between lesson changes ▪ Cleaner-disinfectant and paper towel to be located in teaching spaces for staff to clean if they see the need i.e. if a child sneezes on a desk top etc. ▪ Cleansing wipes to be located by photocopiers to allow users to wipe buttons/touchscreen after each use. ▪ Cleaning protocol further enhanced for isolation space and cleaning after any person has been present whilst displaying symptoms. ▪ Please refer to Cleaning Guidance for full details of cleaning methodology plus COSHH details of cleaner-disinfectant.
<p>13. Cleaning tasks (enhanced)</p> <p>Potential for indirect contracting of COVID-19 whilst undertaking cleaning</p>	Cleaning staff	1	4	4	<ul style="list-style-type: none"> ▪ See separate cleaning guidance and associated risk assessments ▪ Cleaners' PPE to be disposable gloves and disposable or laundered aprons. ▪ FFP2/FFP3/N95 respirators are for direct contact (within 2m for >15minutes) with an individual who is displaying symptoms so should NOT normally be required for these tasks – refer to cleaning guidance. See exception below. ▪ If not disposable, laundered aprons should be washed on the hottest wash possible for the clothing concerned ▪ Removed PPE to be double-bagged for disposal ▪ A disinfectant/cleaner (either combined or separate) to be used. Ensure that this has a confirmed viricidal action. ▪ Usual COSHH risk assessment findings to be followed in respect of chemical safety and use.

					<ul style="list-style-type: none"> ▪ Please refer to Cleaning Guidance for full details of cleaning methodology plus a <i>suggested</i> example cleaner/disinfectant. ▪ Launder cloths daily or use disposable paper rolls. ▪ All staff to follow a ‘clear-desk’ policy to enable regular cleaning of all hard surfaces. ▪ Unnecessary paperwork and displays to be removed to allow surfaces to be sanitised. ▪ Cleaning of isolation room: if visual contamination is evident in the room e.g. saliva on table surfaces etc then PPE in the form of gloves, apron, respirator to be worn for clean. Contaminated area to be pre-treated with Titan sanitiser.
<p>14. Transport</p> <p>Potential for direct and/or indirect contracting of COVID-19 whilst undertaking cleaning</p>	Students	2	3	6	<ul style="list-style-type: none"> ▪ Alternative means of transport to bus travel encouraged wherever possible – walking, cycling, private car travel. ▪ The Trust is not the principal duty holder in respect of transport organised by others. The strategy will therefore be to cooperate with and communicate the risk assessment findings of other partner organisations as well as reinforcing and communicating government guidance for the safe use of general public transport. ▪ DCC Transport Coordination Service risk control measures to apply to school buses. ▪ In line with government guidance for public transport and dedicated school transport, students will be required to wear a face-covering*. ▪ Staff supervision to remind students of requirement to wear face covering when boarding. ▪ Any child, young person or other learner who starts displaying coronavirus symptoms while at their setting should wherever possible be collected by a member of their family or household. ▪ Transport provider to clean regularly touched hard surfaces between uses ▪ All passengers alighting from a bus will go straight to their Tutor base where they will sanitise hands. Similarly, transport users will sanitise hands before leaving the building to board the bus.

					<i>*PPE protects the individual from the virus. A face-covering offers little protection to the individual but it will protect others <u>from</u> the individual by limiting the travel of their breath or cough/sneezes. See separate guidance on use of face-coverings.</i>
--	--	--	--	--	---

Key to delineation of 'Risk'

See DMAT Health & Safety Policy for more information and detail.

- The L score indicates the 'likelihood' of the event scored from 1 to 5, where: 1 is very unlikely, 5 is very likely.
- The S score indicates the 'significance' of the event scored from 1 to 5, where: 1 is 'insignificant' (e.g., no injury), 2 is 'minor' (e.g., injury needing first aid, 3 is 'moderate' (e.g., absence up to 7 days), 4 is 'major' (e.g., absence greater than 7days), 5 is 'catastrophic'.
- The R score is derived by multiplying the 'likelihood' of an event by its 'significance', i.e., $R = L \times S$.

Scores between 1 and 6 are tolerated as low risk. Scores between 7 and 12 should indicate measures taken to reduce risk from medium to low. Scores over 12 indicate high risk and activity should cease immediately.