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GHF RISK ASSESSMENT – ANNOTATED FOR GLENBROOK PRIMARY SCHOOL		
Service/Person: Gipsy Hill Federation of Primary Schools	Assessment Team Members: Executive Headteacher, Headteachers	Assessment Review Dates: 13.12.21
Area Assessed: Mitigation measures for safe opening of school in light of Covid-19	Name: Jane Scarsbrook Sign:	Updated based on previous risk assessments reviewed at regular intervals throughout global pandemic
Date of Assessment: 1 November 2021	Name: Sign:	
School: Glenbrook Primary School	Name: Sign:	

This document outlines the arrangements for the full opening of all schools in the Gipsy Hill Federation. This risk assessment also outlines our approach to mitigate risk in the case of primary school closures to all but the children of critical workers and vulnerable children. **Where primary school closures are in place to all but the children of critical workers and vulnerable children, children will be grouped throughout the week in consistent bubbles staffed using consistent staff teams. Due to smaller numbers of pupils, bubble sizes will be reduced to further mitigate risk and reduce risk of transmission. Where appropriate and possible (i.e in the older year groups), groups will be set up and classrooms organised so as to encourage social distancing of at least 1m+.** Each individual school adds site specific arrangements, such as the timetabling of staggered starts to the school day and so on. Where present, these are highlighted throughout the document and / or appear as appendices to the main document, as follows where appropriate:

Appendix A – details of cleaning arrangements for specific sites

Appendix B – details the groupings for each site to reduce transmission of COVID19. These will be unique to the site as they will depend on physical aspects of the premises, staffing, academic need, pupil roll.

Appendix C - Staggered arrival/ departure arrangements, including entrances used and staffing of these

Appendix D – Allocation of toilets

Appendix E – Cover arrangements for staff absence / PPA etc

Appendix F – Timetable for use of outdoor areas for play, learning etc

Appendix G – Timetable for staff room use

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Appendix H – Timetable for lunch arrangements

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FURTHER INFORMATION:

This risk assessment should be used alongside the government guidance below:

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

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>

<https://www.gov.uk/government/publications/coronavirus-covid-19-local-restrictions-in-education-and-childcare-settings/contingency-framework-education-and-childcare-settings>

<https://www.hse.gov.uk/coronavirus/assets/docs/risk-assessment.pdf>

Please note: From 16th August, identified close contacts who meet the below criteria will no longer be legally required to self-isolate:

- i. fully vaccinated and at least 14 days have passed since receiving the recommended doses
- ii. aged under 18 years and 6 months
- iii. taken part in or currently part of an approved COVID-19 vaccine trial
- iv. not able to get vaccinated for medical reasons

The following school policies have been reviewed and updated or addendums written as required:

- *Behaviour Policy*
- *Safeguarding & Child Protection Policy*
- *Health and Safety Policy*
- *School Business Continuity Plan*
- *First Aid Policy*
- *Administration of Medicine on Schools Premises Policy*
- *Attendance Policy*
- *Intimate Care Policy*
- *Positive Handling Policy*
- *Supporting Pupils at School with Medical Conditions Policy*

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The following abbreviations are in use throughout this document:

- *GHF – Gipsy Hill Federation*
- *GB – Governing Body*
- *EHT – Executive Headteacher*
- *HoS – Head of School*
- *SENDCo – Special Educational Needs and Disability Co-ordinator*
- *CT – class teacher*
- *PO – premises officer*
- *FSO – Family Services Officer*
- *DSL – Designated Safeguarding Lead*
- *SAO – Senior Administrative Officer*
- *DHI – Deputy Headteacher for Inclusion*

Please note - when referring to staff, this will also include volunteers and trainee teachers.

		Recommended controls/Mitigation and Protective Measures	In place? Yes/No	By whom?	Additional notes
Sub sections		Key section: Awareness of and adherence to policies and procedures			
Awareness of and adherence to policies and procedures		<ul style="list-style-type: none">• Health and Safety Policy has been updated in light of the COVID-19 advice• All staff, pupils and volunteers are aware of all relevant policies and procedures including, but not limited to, the following:<ul style="list-style-type: none">- Health and Safety Policy- First Aid Policy• All staff have regard to all relevant guidance and legislation including, but not limited to, the following:<ul style="list-style-type: none">- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013	Yes	EHT/HoS	

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		<ul style="list-style-type: none">- The Health Protection (Notification) Regulations 2010- Public Health England (PHE) (2017) 'Health protection in schools and other childcare facilities'- DfE and PHE (2020) 'COVID-19: guidance for educational settings' <ul style="list-style-type: none">• The relevant staff receive any necessary training that helps minimise the spread of infection.• The school keeps up-to-date with advice issued by, but not limited to, the following:<ul style="list-style-type: none">- DfE; NHS; Department of Health and Social Care; PHE, Lambeth and Southwark local authorities.• Staff are made aware of the school's infection control procedures in relation to coronavirus including access to Lateral Flow Device testing (see more details at the end of the risk assessment)• Parents are made aware of the school's infection control procedures in relation to coronavirus via text, letter and school website– they are informed that they must not send their child to school if they have <u>coronavirus (COVID-19) symptoms</u>, or have tested positive in the last 10 days. In these circumstances the parents/carers should call the school to inform the school of this and that they will be following the national Stay at Home guidance. In all GHF schools this will be achieved through repeat texts and emails home, use of GHF website and school notice boards, where possible materials to be available in most commonly spoken languages in school community. Where there are concerns around compliance / understanding, FSOs/SLT will make direct contact.• Pupils are made aware of the school's infection control procedures in relation to coronavirus and are informed that			
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		<p>they must tell a member of staff if they begin to feel unwell. In all GHF schools this is achieved through class teaching, circle times, virtual assemblies, adult re-enforcement and modelling. All to be repeated regularly, and reinforced through positive praise.</p> <ul style="list-style-type: none"> • Staff and pupils are made aware of the process for removing face coverings when pupils and staff who use them arrive at school, and for staff during the school day, and this is communicated clearly to parents and staff. This is included in information about infection control procedures as described above, and is monitored by school staff at entry points to the school for pupils using face masks for travelling to school. • The Staff and Volunteer Confidentiality Policy and Pupil Confidentiality Policy are followed at all times – this includes withholding the names of staff, volunteers and pupils with either confirmed or suspected cases of coronavirus. 			
Sub sections	Key section: Prevention				
Minimise contact with individuals who are unwell with COVID-19 symptoms		<ul style="list-style-type: none"> • Pupils, staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, or have tested positive in at least the last 10 days, and anyone developing those symptoms during the school day is sent home. Signage at entry points to the school makes this clear. Staff are aware of the process and are reminded as needed. Parents are reminded through use of website, text, emails, signage and direct contact FSO / SLT as needed. • Any pupils or staff returning from abroad must follow government guidance regarding isolation periods/quarantine rules when travelling to the UK. 	Yes	HoS/SAO	

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		<ul style="list-style-type: none">• The school promotes and staff are encouraged to engage with twice weekly asymptomatic testing. In case of a positive LFD test, member of staff (and any household member who is not fully vaccinated and/or is under 18 years and 6 months) to isolate (see further details re: LFD asymptomatic testing further into the risk assessment) prior to accessing PCR test. Following the PCR test, please follow public health guidance.• Details of asymptomatic testing available to families and household members of primary-aged children to be shared with all parents/carers. In case of a positive LFD test, household members who are not fully vaccinated and/or under 18 years and 6 months will isolate prior to accessing PCR test. Following the PCR test, please follow health guidance.• If anyone in the school becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they are sent home and advised to follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection', which sets out that they must self-isolate for at least 10 days and should arrange to have a test to see if they have coronavirus (COVID-19). If they have tested positive whilst not experiencing symptoms but develop symptoms during the isolation period, they should restart the 10 day isolation period from the time they develop symptoms. Other members of their household (including any siblings) should self-isolate for 10 days from when the symptomatic person first had symptoms unless they are fully vaccinated and/or are under 18 years and 6 months.• If the pupil or member of staff tests negative via PCR they (and members of their household where applicable) can stop			
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		<p>self-isolation and return to school when they no longer have fever.</p> <ul style="list-style-type: none">• If a child or adult is sent home with suspected COVID-19 symptoms, any other members of their household must also be sent home if they are not fully vaccinated and are over 18 years and 6 months. School offices should offer to assist families / staff in making contact with other GHF sites, or any other educational setting if requested to do so by the family / school adult.• School offices will maintain a log of isolation dates for pupils, with likely return dates. Pupils or school adults who are self-isolating for 10 days because someone in their household has tested positive will not be re-admitted to school earlier.• School offices will maintain a log of isolation dates for staff and will share this with GHF HR• Staff must supply isolation notes, medical certificates and any test results where applicable to the school office. These will be scanned and sent to GHF HR to retain in HR files.• If a child is awaiting collection, they are moved, where possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. A window should be opened for ventilation. If it is not possible to isolate them, they are moved to a well-ventilated area which is at least 2 metres away from other people and where others have access to PPE. The isolation room at Glenbrook Primary School is the CPD room next to the main reception. In the event this room is in use or multiple children are waiting to be collected, the alternative area is the 'sensory' room on the top floor.• 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			
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		<p>standard cleaning products before being used by anyone else. The identified toilet at Glenbrook School is the adjacent toilet in the CPD room (for a small child Rec – Y3) or the adult toilet nearest the large hall for an older child or adult.</p> <ul style="list-style-type: none">• Everyone will 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 with normal household disinfectant after they have left to reduce the risk of passing the infection on to other people. See https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings#left-area.• PPE will be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the <u>safe working in education, childcare and children’s social care settings, including the use of personal protective equipment (PPE)</u> guidance.• 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.• Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) and they have been requested to do so by NHS Test & Trace and are not fully vaccinated and are over 18 years and 6 months.• https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings#left-area			
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		<p>decontamination-in-non-healthcare-settings#left-area.guidance to be followed to clean the area and to bag, remove and store any waste for disposal until the outcome of the test is known.</p> <ul style="list-style-type: none">• Any medication given to ease the unwell individual's symptoms, e.g. paracetamol, is administered in accordance with the Administration of Medicine on School Premises Policy• Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with the guidance in Cleaning in non-healthcare settings https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings#left-area.			
Good hand hygiene practice		<ul style="list-style-type: none">• The School will ensure that pupils clean their hands regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating.• Supervision of hand sanitiser use will take place due to risk around ingestion. Younger pupils and pupils with complex needs will continue to be helped to clean their hands properly.• The school will build hand washing routines into school culture, supported by behaviour expectations set out in the school Behaviour Policy.• Pupils arriving at school wearing a face covering are instructed not to touch the front of their face covering during use or when removing them. They immediately wash their hands on arrival, (or sanitise hands with alcohol based rub) dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they take home with them, and then wash their hands again (or	Yes	HoS/PO	

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		<p>sanitise hands with alcohol based rub) before heading to their classroom. Guidance on 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 provides more advice.</p> <ul style="list-style-type: none">• There will be adult supervision at all entry points to the school to ensure correct hygiene and disposal / storage of masks is maintained. The adult on duty will have access to a supply of suitable plastic bags as needed.• The bin used for disposal will be emptied after children and adults have arrived for the school day, and as needed throughout the day. The contents will be disposed of in accordance with guidance in 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• Sufficient handwashing facilities are available. Where a sink is not nearby, provide hand sanitisers in classrooms and other learning environments• The school maintains adequate stock of soap, hand sanitiser and paper towels. The PO is responsible for ensuring that supplies are topped up at the start of the school day and that dispensers are working properly. All staff are responsible for advising the PO / school office if stock appears to be running low at any point during the school day.• Lidded bins are provided for disposal of used paper towels etc, and will be emptied regularly as needed. All staff are responsible for alerting the PO if bins become too full at any point.			
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Good respiratory hygiene		<ul style="list-style-type: none">• 'Catch it, bin it, kill it' approach continues to be very important, suitable number of tissues and lidded bins available in the school to support pupils and staff to follow this routine. Pupils are reminded frequently, and adults model correct behaviour.• The school keeps sufficient stock of tissues. All adults are responsible for alerting the school office if stock in any area appears to be running low.• Younger pupils and those with complex needs are helped to follow this guidance. Where appropriate, individual risk assessments for pupils with complex needs will be written in partnership with parents and the young person.• Risk assessments are used to identify pupils with complex needs who struggle to maintain good respiratory hygiene, for example those who spit uncontrollably or use saliva as a sensory stimulant.• The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage good hand and respiratory hygiene, which staff in GHF schools will use as needed.• PHE does not recommend the use of face coverings in primary schools for pupils, or in classrooms for staff. This evidence will be kept under review and adjustments made in line with PHE guidance.	Yes	HoS/SENDCo/CT	
Increased ventilation		<p>Good ventilation is important, and should be maximised wherever possible by opening windows, and propping open doors, as long as they are not fire doors, where it is safe to do so.</p> <p>Ventilation to ensure constant air flow throughout the day will be maintained in all shared spaces, including classrooms. Additional ventilation by fully opening windows and doors to create a draft over a sustained period of time will be created at all times where pupils are e.g. out to</p>	Yes	HoS, PO	

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		<p>play/lunch. Relaxation around uniform/dress code rules are in place to support staff and pupils to be adequately dressed during the colder months.</p> <p>In Glenbrook school this is achieved by:-</p> <ul style="list-style-type: none">○ Ensuring all classroom windows and windows in common areas, toilets, offices and staff rooms are opened in the morning by the premises officer, or other designated member of staff○ To ensure site security at the end of the school day, Glenbrook has made the following arrangements to ensure windows are closed:<ul style="list-style-type: none">▪ PO/Class teachers to be responsible for ensuring classroom windows are shut▪ SLT, FSO, SENDCO and office staff responsible for ensuring office windows are shut.▪ Cleaning staff to check windows shut when carry out evening clean of the school▪ Regular reminders given to staff.			
Enhanced cleaning		<ul style="list-style-type: none">• PHE guidance for cleaning non-health care settings is followed (https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings), in addition to normal cleaning schedule• There will be more frequent cleaning of rooms or areas which are used by different groups, as detailed in Appendix A.• Surfaces that pupils are touching, such as desks, chairs, doors, sinks, toilets, light switches, bannisters, resources and shared books are cleaned more regularly than normal with standard products such as detergents or bleach; In	Yes	HoS/ PO / CT/ support staff / extended services team	

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		<p>Glenbrook school this will be done according to the cleaning schedule in Appendix A</p> <ul style="list-style-type: none">• The PO / HoS will carry out spot checks to ensure that the arrangements made for enhanced cleaning are being carried out effectively, and record this in a log. Any remedial action required is detailed, and Appendix A updated as necessary.• Cleaning materials will be kept away from younger children to prevent ingestion. Where children are trained to help and involved in cleaning their own work areas or resources, safe cleaning products are chosen, such as washing up liquid, and children are supervised. These arrangements, if in use, are detailed in Appendix A• Soft furnishings, soft toys and toys that are hard to clean (such as those with intricate parts) are minimised where their removal does not impact the educational provision for pupils.• Toilets to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet - different groups being allocated their own toilet blocks could be considered but is not a requirement if the site does not allow for it.• At Glenbrook school, year groups / phases will be allocated the following toilet areas to minimise movement around the school. Reception - own toilets; Year 1 & Year 2 – KS1 toilets; Year 3 – toilets nearest classroom; Y4, 5 & 6 – toilets nearest Y4 classroom on the top floor. At breaktimes, Y3-6 access downstairs KS2 toilets following handwashing hygiene• The COVID-19: cleaning of non-healthcare settings guidance is followed.• Playground equipment to be cleaned more regularly and its use between different groups of children to be minimised.			
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		<ul style="list-style-type: none">• Resources used inside and outside by wrap around care providers / GHF staff are subject to the same guidance. Contracted extended care providers will detail arrangements for cleaning resources in their risk assessment, which will be shared with and approved by the Extended Services Manager. A copy of this risk assessment is available in school and can be shared with service users.• The Extended Services Manager will ensure a regular review and intermediate spot checks are in place to monitor compliance. These reviews should be logged, and shared with the HoS.• Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with the infection control section of the Health and Safety Policy and Cleaning in non-healthcare settings guidance• Cleaners are employed by the school to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy.• Enhanced cleaning to be undertaken where required, and as requested by the HoS / PO – advice about enhanced cleaning protocols is sought from the local health team. Schools short of cleaning product supplies, should email DfE-CovidEnquiries.COMMERCIAL@education.gov.uk• The PO and HoS monitor the cleaning standards of school cleaning contractors and liaises with EHT to commission any additional measures required with regards to managing the spread of coronavirus.• The schedule of cleaning detailed in Appendix A notes which staff members / cleaning contractors have the overarching responsibility for given areas. The PO / HoS will carry out and log routine inspections and spot checks.			
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		<p>However, ALL staff are expected to be mindful of the need for thorough cleaning and should immediately alert the HoS if they have any concerns.</p> <ul style="list-style-type: none">• Regular meetings with the cleaning contractors to monitor service provision will be held			
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Minimise contact between staff / pupils / visitors in school		<ul style="list-style-type: none">• Contact between classes/year groups to be minimised wherever possible and where it will not have a detrimental impact on the educational provision for pupils. Levels of community transmission and any concerns regarding local variants will be taken into consideration when making decisions that impacts contact between classes/year groups.• The groupings in use in Glenbrook school are shown in Appendix B• The deployment of staff in Glenbrook school are shown in Appendix B• The planned deployment of staff to ensure that the full educational offer is available in Glenbrook school is shown in Appendix B• Staff should reduce contact across classes/year groups wherever possible and where it will not have a detrimental impact to the educational provision for pupils. Where staff need to move between classes and year groups, where possible they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Ventilation will also be prioritised in these circumstances.• Adults to avoid close face to face contact and minimise time spent within 1 metre of anyone.• All staff and visitors (unless exempt) are strongly encouraged to wear face coverings in the following situations: where social distancing between adults isn't possible; when moving around the schools; and when using communal areas including toilets, staff rooms etc. In the staff room, a communal area where use of face coverings may be reduced due to the consumption of food and drink, adherence to additional mitigation will be required: sticking to the maximum number of staff allowed in the staff room	Yes	HoS / EHT / Extended Services Manager / DSL / CT	
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		<p>area at any one time, 2m+ social distancing, good levels of through ventilation.</p> <ul style="list-style-type: none">• Large inside gatherings such as whole school, whole key stage (in the larger schools) or large assemblies are avoided and assemblies are delivered in smaller groups or are held outside where possible.• Additional mitigation in line with the needs of the school are achieved by:<ul style="list-style-type: none">○ Plan for lessons or activities which keeps movement around the school site to a minimum; see Appendices F and G○ Maximise the number of lessons or classroom activities which could take place outdoors; see Appendix F○ Additional measures are put in place to support the management of specialist interventions (cc. separate risk assessment on website under inclusion)○ Break times (including lunch) are staggered so that all pupils are not moving around the school at the same time; See arrangements in Appendices F and B○ Drop-off and collection times are staggered and communicated to parents; See arrangements in Appendix C⇨ Parents' drop-off and pick-up protocols are planned and communicated so that they minimise adult to adult contact⇨ Use of staff rooms has limited occupancy with additional rooms available for staff breaks. See arrangements in Appendix G.			
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		<ul style="list-style-type: none">○ Use of offices has been considered to support social distancing and additional mitigations are in place such as perspex screens. Staff should not enter offices or workspaces if this would compromise the social distancing of the staff working there.○ Opportunities for parents to engage in key events will be communicated on an event-by-event basis and will be dependent on current rates of community transmission.● Minimise on-site visitors and ensure that there is a clear educational, safeguarding or welfare purpose to any visit. Any visitor coming on site must be agreed by the headteacher.● Ensure staff meetings and staff briefings allow for appropriate distancing and mitigation. Virtual platforms can continue to be used in case of outbreaks, high community transmission levels and where wider access is needed and therefore appropriate mitigation measures cannot be achieved.● When hosting external meetings on site e.g. core group meetings - where face-to-face meetings take place, these should take place in a well-ventilated room where 2m social distancing can be maintained throughout the meeting. Clear expectations around hygiene measures will be communicated to all in the meeting and lack of adherence will result in the meeting being terminated. Where social distancing and ventilation isn't possible, the use of face masks will be encouraged.● Key contractors (catering, cleaning and wraparound care provision) are made fully aware of the school's risk assessment by the PO / HoS / Extended Services Manager.			
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		<p>Their risk assessments are also shared with and agreed by the school.</p> <ul style="list-style-type: none">• Visitors to the site, such as contractors, local authority employees and health employees to be fully briefed on the school's arrangements and follow site guidance on physical distancing and hygiene and the use of face masks on or before arrival. Where visits can happen outside of school hours, they should. A record will be kept of all visitors. Visitors will be informed that their contact details might be shared with appropriate NHS/public health bodies in the case of an outbreak or for contact tracing where appropriate.• Classroom based resources, such as books and games are cleaned regularly, along with all frequently touched surfaces.• Pupils to reduce the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery and mobile phones. Bags are allowed. Class teachers should ensure that such items are stored tidily, and that unnecessary overcrowding does not occur when pupils store or access these items.• Wherever possible, Staff and pupils have their own individual equipment for resources that are frequently used such as pencils and pens.• Physical Education classes should be kept in consistent groups and sports equipment thoroughly cleaned between use by different groups. Outdoor sports and the use of large indoor spaces to be prioritised. Class teacher must ensure that their lesson planning supports these aims, and that they adhere to the timetabling of outdoor or indoor spaces to avoid unnecessary congestion occurring.• Singing assemblies to be delivered in e.g year groups (depending on the size of the school) as per risk assessment for all assemblies.			
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Use of PPE		<ul style="list-style-type: none"> • The majority of staff in education settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including: <ul style="list-style-type: none"> ○ where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained ○ where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used ○ Individual risk assessments to be put in place for children with intimate care or medical needs that require the use of PPE. These will be written and shared with parents and the young person. • Read the guidance on <u>safe working in education, childcare and children’s social care</u> for more information about preventing and controlling infection and follow <u>SCC PPE guidance</u>. 	Yes	HoS / SENDCo	
Sub sections	Key section: Response to Infection				
Test and trace		<ul style="list-style-type: none"> • NHS Test and Trace process to be followed and contact will be made with local Public Health England health protection team as per the most up-to-date guidance from the local team and the London Coronavirus Response Cell (LCRC). Staff members and parents/carers understand that they will need to be ready and willing to: <ul style="list-style-type: none"> ○ <u>book a test</u> if they are displaying symptoms or if they have had a positive LFD test result (or two void LFD tests). Staff and pupils must not come into the school if they have symptoms or have had had a positive LFD test result (or two void LFD tests), and must be sent home to self-isolate if they develop them in school. A positive LFD test (or two voids) 	Yes	HoS	

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		<p>leads to: a) staff member and their household (if they are not fully vaccinated and are over 18 years and 6 months) isolating; b) close contacts who have not been fully vaccinated and are over 18 years and 6 months self-isolate including anyone who has been in close contact in the period starting 48 hours before positive LFD test. Staff member with positive LFD test books PCR. If PCR test = negative, close contacts and member of staff can stop self-isolation.</p> <ul style="list-style-type: none">○ All pupils can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit○ provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test & Trace○ <u>self-isolate</u> if they have been in close contact with someone who tests positive for coronavirus (COVID-19) or if anyone in their household develops symptoms of coronavirus (COVID-19) if they are not fully vaccinated and are over 18 years and 6 months● A small number of home testing kits available to be given directly to parents/carers collecting a child who has developed symptoms at school or staff who have developed symptoms at schools, where providing a test will increase the likelihood of them getting tested.● Staff are required to book the first possible test that they can access and inform their Head of School of the result as soon as they receive it.● Parent code of conduct states that parents must access a test for their child if their child develops symptoms for			
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		<p>coronavirus (Covid-19) and inform the school immediately once they have received the result.</p> <ul style="list-style-type: none">• The school will ask parents and staff to inform them immediately of the result of the test:<ul style="list-style-type: none">○ If someone tests negative, if they feel well and no longer have fever they can stop self-isolating. They may have another virus, such as a cold or flu, in which case it is still best to avoid contact with others until they feel better. Where other members of the household were self-isolating, they can stop self isolating.○ If someone tests positive they should follow the '<u>stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection</u>' and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10 day period starts from the day when they first became ill. If they develop symptoms after they test positive, the 10 day isolation period starts from the day that they develop symptoms, not from the day of the test. If they still have a high temperature, they should keep self isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 10 days if they are not fully vaccinated and are over 18 years and 6 months.• All GHF sites will ensure that this advice is regularly given to parents via newsletters, website etc. Whenever possible, the advice will be translated into the languages of the school community, or a text message sent in their own language			
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		<p>urging them to seek assistance from a trusted member of their community to assist with translation.</p> <ul style="list-style-type: none">• Please note negative LFD tests do <u>not</u> mean that anyone instructed to self-isolate no longer needs to isolate. The full 10-day isolation period must be completed.			
Managing confirmed COVID-19 cases		<ul style="list-style-type: none">• Flowchart school response to suspected or confirmed COVID-19 cases to be followed for suspected or confirmed cases. This flowchart can be found as Appendix I, and should be displayed in all school offices. Please note that any close contacts who are fully vaccinated and/or are under the age of 18 years and 6 months will not be required to self-isolate but will instead be encouraged to take a PCR test.• NHS Test and Trace carry out contact tracing and will work with members of staff and/or parents/carers of pupils who have tested positive to identify and advise close contacts. In some circumstances, NHS Test and Trace might contact the school to support in the management of a potential outbreak and to support in the identification of close contacts. The school will work with NHS Test and Trace and local Public Health teams accordingly and will share their advice.• Where there are 5 or more confirmed cases between groups (children, pupils, students or staff) who are likely to have mixed closely, within a 10-day period or 10% of children, pupils, students or staff who are likely to have mixed closely test positive for Covid-19 within a 10-day period, the health protection team will provide guidance to support a rapid risk assessment to identify next steps. Where there is a possible outbreak in a school, or as part of a package of measures responding to a Variant of Concern (VoC), groups of pupils might be requested to self-isolate. Where this takes place, the school's contingency plan for the delivery of remote education will come into effect. The remote education plan is published on the GHF website and can be found here: ghf.london/home-learning	Yes	HoS	

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		<ul style="list-style-type: none"> Schools should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation. 			
Contain any outbreaks		<ul style="list-style-type: none"> If five or more cases are confirmed within 10 days, or 10% of those who would be considered close contacts or an overall rise in sickness absence where COVID-19 is suspected, there may be an outbreak and the local health protection will advise on any additional action required. Schools must call the dedicated advice service, who will escalate the issue to the PHE local health protection team where necessary and advise if additional action is required. Schools to have a proportionate recording process in place to record any close contact that takes places between pupils and staff in different groups to help with the management of contact tracing and in the case of a suspected outbreak. Follow local health protection advice, this may include a larger number of other pupils self-isolate at home as a precaution. In these circumstances, remote education will be put in place in line with our home learning offer outlined at https://www.ghf.london/home-learning Whole school closure should not be considered except on the advice of health protection teams In consultations with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who tested positive. 	Yes	HoS	
Sub sections		Key section: Safeguarding			
The lack of availability of		<ul style="list-style-type: none"> Designated Safeguarding Lead training for all existing DSLs was renewed June/July 2020 	Yes	EHT / HoS	

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Designated Safeguarding Leads may put children's safety at risk		<ul style="list-style-type: none"> Additional members of staff (middle leaders) attended designated safeguarding lead training in June/July 2020 so as to build capacity across the team 			
Increase in welfare concerns linked to additional stresses on families during this crisis, including significant hardship		<ul style="list-style-type: none"> Where staffing allows, increase capacity within the pastoral team to support families Adjustments to be made to the role of Designated Safeguarding Lead to support the predicted increase in workload. Working in partnership with LA to signpost parents to appropriate support Working in partnership with local organisations to provide support to families and, where possible, accessing resource for families. All DSLs to access mental health and safety planning training to be better equipped to support vulnerable pupils and families 	Yes	EHT / HoS / DSL / SENDCo	
Supporting provision for children who are dual registered		<ul style="list-style-type: none"> Work in partnership with parent, child/young person and the alternative provision to complete individual risk assessments 	Yes	HoS / DSL / SENDCo	
Due to staggered start and end times to the day, the gates will be open for a significant period of time both at the start and end of the day.		<ul style="list-style-type: none"> Set up protocols with all staff to ensure that gates are only open when staff are present and when children are actively being dropped off or picked up from school whilst being supervised by adults Parents to be informed of the above protocols 	Yes	HoS	

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Sub sections	Key section n: First Aid and meeting the needs of children with medical conditions/intimate care needs				
The lack of availability of designated First Aiders may put children's safety at risk		<ul style="list-style-type: none"> • Existing support staff have completed emergency first aid refresher course on line. • Updated paediatric training. • Named first aiders on display around the building. 	Yes	HoS / DHT / SENDCo	
Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier when administering first aid of having to provide additional adult support		<ul style="list-style-type: none"> ▪ Where face-to-face contact is essential, this should be kept to 15 minutes or less whenever possible, contact should be side by side, or with adult standing behind child. Adult should maintain height difference, and not interact with children by kneeling or crouching below the child's face level • PPE has been provided in cases where first aid needs to be administered involving close face-to-face contact - glove, aprons, face mask, face shield/eye protection (where appropriate). • Gloves, aprons, face masks are located in each classroom. Goggles are located in key areas in the building in case of serious injury where first aid needs to be administered for a prolonged period of time. • Where appropriate, older children may be asked by the member of staff to wear a face mask when first aid is being administered/intimate care is being provided for a prolonged period of time so as to further reduce risk of transmission. • Staff to follow first aid procedures when administering first aid to pupils or staff 	Yes	HoS / DHT / SENDCo	

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<p>Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier providing intimate care</p> <p>Emotional impact on child receiving intimate care due to use of ppe by member of staff</p>		<ul style="list-style-type: none">• Staff to take above points for administration of first aid into consideration.• Individual Intimate care plan put in place in partnership with the parents and young person. Intimate care plan to detail which ppe is needed in order ensure safe procedures with a clear rationale for its use and purpose.• PPE provided directly to all members of staff named on the intimate care plan specific for the delivery of the intimate care plan• Pupil who has an intimate care plan in place to be supported to understand the use of ppe through e.g. visuals and familiarise themselves with the ppe (e.g. a set to play with themselves)	Yes	HoS / DHT / SENDCo	
<p>Increased risk of transmission of Covid-19 in the case of an asymptomatic carrier when administering medication</p> <p>Emotional impact on child when medication is being administered due to use of</p>		<ul style="list-style-type: none">• Staff to take above points for administration of first aid into consideration.• Wherever possible, children to be supported and supervised to administer their own medication e.g. asthma pumps.• Where staff have to administer medication to consider how they position themselves and ensure good handwashing hygiene before and after administration of medication.• Additional advice to be outlined on staff room medical boards regarding the safe administration of common medication, such as asthma pumps.• Where individual medical care plans are in place and where needed, amendments are made to reflect increased safety controls needed.	Yes	HoS / DHT / SENDCo	

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<p>ppe by member of staff</p>		<ul style="list-style-type: none"> • Where appropriate, individual medical care plans to detail which ppe is needed in order ensure safe procedures with a clear rationale for its use and purpose. • PPE provided directly to all members of staff named on medical care plan specific to the delivery of the intimate care plan • Pupil who has a medical care plan in place to be supported to understand the use of ppe through e.g. visuals and familiarise themselves with the ppe (e.g. a set to play with themselves) • Where appropriate, older children to be provided with a face mask to wear whilst medication is being administered 			
<p>Sub sections</p>		<p>Key section: Educational visits</p>			
		<ul style="list-style-type: none"> • Domestic educational day visits can now be organised within class groups/year groups. Any educational visit must be first agreed by the headteacher and fully risk assessed in line with national guidance for the mitigation against Covid in addition to the usual school protocol. 			
		<p>Key section: Lateral flow device testing</p>			
<p>Failure to engage staff in the LFD testing programme – poor participation may result in increasing transmission</p>		<p>-School promotes the use of Lateral Flow (LFT) test kits with staff by providing information and training and support e.g. NHS training video, the correct How-to Self-Test guide etc. - All employees are encouraged to participate - LFD tests are approved by the MHRA for the purpose of staff testing</p>	<p>Yes</p>	<p>HoS</p>	

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<p>Failure to manage test kits on school premises</p> <p>Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing resulting in</p> <ul style="list-style-type: none">• false or inaccurate results• reduced testing capacity• Transmission of COVID-19 injury to users		<ul style="list-style-type: none">- Non delivery of test kit supplies is immediately referred to DfE helpline- replacement LFT kits are ordered in a timely manner- Supplies of LFT test kits are securely stored between 2 and 30 degrees C- Participants are made aware of who is co-ordinating and monitoring home testing activity (the SAO). Incidents whilst using kits are reported to this person.- Collection times for test kits are staggered to avoid crowding and to maintain social distancing requirements. Face coverings worn- Test Kit Log is used to record lot numbers and confirms issue of correct instructions- Participants collecting test kits sign the Test Kit Log to confirm receipt and are advised how to report their test result- Scheduling of testing is organised to meet operational requirements	Yes	HoS	
<p>Failure to obtain consent from those being tested</p> <p>School and employees</p> <p>Failure to follow agreed Standard Operating Procedures and breach of data protection protocols</p>		<ul style="list-style-type: none">- Participation in home testing is voluntary and by consent. Those staff unwilling to take home tests and who do not display symptoms can attend school.- Participants are advised of how the test data will be used and have received a copy of the privacy notice	Yes	HoS	

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<p>Persons displaying Covid symptoms or who has contact with someone with symptoms attends the school site to collect LTF test kit.</p> <p>School population may be harmed by transmission of the virus leading to ill health or potential death</p>		<p>-Participants should not attend school to collect test kits if:</p> <ul style="list-style-type: none">- they have any symptoms of COVID 19, or- live with someone who is showing symptoms of COVID 19 if they are not fully vaccinated and are over 18 years and 6 months, or- if they have been advised to self-isolate with a household member, or- have ongoing contact with someone who has received a positive test if they are not fully vaccinated and are over 18 years and 6 months.	Yes	HoS	
<p>Test participants displaying symptoms are advised to take the wrong type of test</p> <p>School Community Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing</p>		<p>-Anyone with symptoms must book and take a PCR test through the national system</p> <p>-Lateral flow test kits should not be used until the end of the isolation period</p> <p>- If a staff member has had a positive test result confirmed by a PCR test then they do not need to test for 90 days as they should have sufficient antibodies for this period and may show a positive result again during this timeframe.</p>	Yes	HoS	

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<p>Inappropriate storage and disposal of test kits</p> <p>Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing</p>		<p>Workplace – Home test kits once received must be stored inline with guidance provided in a secure location and records kept on distribution to employees.</p> <p>Employees Home Test kits are stored out of reach of children, other vulnerable individuals and pets</p> <ul style="list-style-type: none">- Test kits are stored at room temperature or in a cool dry place (2-30 degrees C)- Test kits must not be stored in a fridge or freezer or left in direct sunlight- If the kit has been stored in a cool area (less than 15 degrees C) it has been at room temperature for 30 minutes (15-30 degrees C) before it is used by the participant.- All items of the test kit are placed in the waste bag on completion of the test. This is placed in the domestic refuse- Any spillages of test solution are absorbed by wiping with a paper towel or tissue. This is placed in the waste bag- The participant washes their hands before & after testing, and cleans surfaces used for testing	Yes	HoS	
<p>Difficulty with carrying out throat and mid-turbinate nasal swab or contamination of swabs</p> <p>Participant Failure to use swab correctly may jeopardise the validity of testing and</p>		<ul style="list-style-type: none">- A complete box of 7 test kits is provided to each participant - adequate supplies for 2-3 weeks of home testing.-- Participants must not eat or drink for 30 minutes prior to the test- Any damaged swab/test packaging is not used and its non-use reported.- Participants do not re-use any of used/damaged test kits- The participant has discarded the original instructions in the box- Separate revised instructions have been provided to participants with the box of LFT swabs. This provides guidance and illustrations on how to use the swab in throat and nose- Participants must have been shown a training video showing them how to self-swab and must consistently follow the instructions	Yes	HoS	

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cause injury or discomfort		<ul style="list-style-type: none">- Participant has available clean flat surface for using test kit and a timing mechanism available- Participant must wash or sanitise hands, use a tissue, and wash or sanitise hands again before opening swab packet- Participants are required to swab both tonsils (or where they would have been) x 4 and the nostrils alongside the lining of the nose- Participant to report any incident with the testing kit or personal injury to the schools.			
Use of test solutions when processing test kit. Contains the following components: NA ₂ HPO ₄ (disodium hydrogen phosphate), NaH ₂ PO ₄ (sodium phosphate monobasic), NaCl (Sodium Chloride) Participant could be harmed by inappropriate use of chemicals		<ul style="list-style-type: none">- Chemical components are not classified as hazardous for use as designed.- Participants should keep test kits out of the reach of children, vulnerable adults and pets when stored at home- Participant should not use test solution if use by date has expired- COSHH assessment for testing solution is available in school	Yes	HoS	
Participants have an allergy – participant may suffer an allergic reaction		<ul style="list-style-type: none">- the swabs in the Innova SARS-CoV-2 Antigen Rapid Qualitative Test kit are latex free- participant to report any allergic reaction to the as a yellow card incident to the MHRA and to the school	Yes	HoS	

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<p>Failure to manage personal samples and to interpret coding</p> <p>Failure to follow agreed Standard Operating Procedures – for processing the sample at home may jeopardise the validity of testing</p>		<ul style="list-style-type: none">- Lateral Flow device is only for use by person they have been issued to and they should not use the test kit on family members etc.- LTF test kit is single use only- swab contents are processed in accordance with training video and written instructions- All the extraction fluid must be used- All the liquid from the swab tip should be squeezed into the extraction tube- Participants must allow 30 minutes for sample to register results.- Participants are made aware that even a faint line against the T on the slide indicates a positive sample and this must be reported to the NHS and school and a confirmatory PCR test taken.- If sample is void another LTF test is carried out- Voids results are reported to the school Covid testing co-ordinator- Results/incidents are monitored by the school- Participants are advised to book and attend a PCR test if they have had two void results in a row	Yes	HoS	
<p>Participants do not report results to Test and Trace</p> <p>Failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing</p>		<ul style="list-style-type: none">- Participants receiving test kits are advised how to report their test result on-line when they collect them- Participants book the test on-line on the Covid 19 Test and Trace website (school may book the test if internet access if not available)- Participants have downloaded the NHS Test and Trace App and report test results to Covid 19 Test and Trace website.-- Participants can alternatively telephone 119 to report results- Participants report every test result including void tests- Participants correctly report the test kit ID number	Yes	HoS	

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<p>Failure to respond to a Positive Test for COVID 19</p> <p>Other occupants of the school or home environment could be exposed to could be exposed to COVID19 virus</p>		<ul style="list-style-type: none">- participant should inform the school of a positive test so cover can be provided- Participant must follow national isolation guidance with their household- The school updates their Covid register if there is a positive Covid result and seeks advice from Local Outbreak Control Team regarding isolation of other contacts	Yes	HoS	
<p>Failure by participant to report incidents or concerns about home testing or LTF kits</p> <p>Failure to manage could impact the quality or safety of testing</p>		<ul style="list-style-type: none">- Participants are advised to report any concerns/incidents with the test kit to the school. E.g. damaged kit, multiple void tests, unclear results, inability to record results to the school and by telephoning 119- Incidents requiring medical care should be reported by contacting 111 or 999- clinical incidents with the potential for harm e.g. a swab breaking in the mouth, or an allergic reaction is reported by the participant as a yellow card concern to the MHRA	Yes	HoS	
<p>Failure by school to report incidents or concerns about home testing or LTF kits</p> <p>Failure to manage could</p>		<ul style="list-style-type: none">- Concerns raised by individual participants are recorded and responded to- Repeated incidents or patterns of concern are reported to the DfE helpline	Yes	HoS	

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impact the quality or safety of testing					
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Appendix A – details of cleaning arrangements for Glenbrook

Time	Cleaning	Personnel
7-7.30am	Surface cleaning resources in all classrooms & PPA room. Checked/refilled daily Hand sanitiser stations set up in playgrounds Hand sanitisers in all rooms checked/refilled	PO
10am	Anti bacterial clean of all door handles, stairwell banisters, communal commonly touched surfaces and keyboards in PPA room	PO
Throughout day	School staff clean any shared equipment (washing up liquid supplied in every classroom) PE and playground equipment allocated to a class. Where shared PE equipment is used, wash between groups.	Teachers & TAs
12 - 2	Midday clean of all children's toilets, adult toilets and staffroom area	Abellian cleaners

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12.15 – 1.30	Tables in lunch hall cleaned between two sittings (surface cleaner stored with lunch tables away from children)	TAs with class in first lunch sitting.
2pm	Anti bacterial wipe of all door handles, stairwell banisters, communal commonly touched surfaces and keyboards in PPA room	PO
4.30pm – 6.30pm	Evening clean – all table surfaces in classrooms, floors, toilets, doors, windows (school staff to leave at 5.30pm to facilitate cleaning)	Abellian
<p>NB in the event of child or adult showing symptoms of Covid 19, the guidance below is followed by PO and school staff (using PPE and double-bagging cleaning waste as guidance outlines) in the first instance with areas signposted as closed for cleaning. Thorough clean by Abellian follows as per guidelines. https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings</p>		

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Appendix B – details the groupings for each site to reduce transmission of COVID19. These will be unique to the site as they will depend on physical aspects of the premises, staffing, academic need, pupil roll.

Individual class groups

At Glenbrook children in classes are maintained for all teaching and movement about the school. Music, art and PE take place in classes. Children have staggered lunch times. Reception and Year 1 have their own lunch time start and own playground area. Years 2 – 6 share the outdoor space freely as it is very spacious (the MUGA is timetabled). Classes have separate, staggered times to enter and exit the school building at the beginning and end of the day with separate stair cases for classes during the day. Classes have own playground equipment.

Intervention rooms

Intervention rooms are allocated as needed for small groups, minimising shared use by different classes wherever possible

Appendix C - Staggered arrival/ departure arrangements, including entrances used and staffing of these

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Reception: arrive 8.55am for **9am start; finish at 3.30pm** (Early Years entrance)

Year 1: arrive 8.40am for **8.45am start; finish at 3.15pm** (KS2 entrance)

Year 2 – 4: arrive 8.55am for **9am start finish at 3.30pm** (KS2 entrance)

Years 5 and 6: arrive 8.40am for **8.45am start; finish at 3.15pm** (KS2 entrance)

All Class staff in relevant playground for 15 mins before the beginning of the school day to direct children to hand sanitising stations and lining up points and to remind of safe distancing. SLT and/or FSO/SENDSCO on gate duty throughout staggered start and end times of the day.

Appendix D – Allocation of toilets

Reception: use EYFS toilets adjoining Reception classroom throughout school day

Year 1 and Year 2: use Key Stage One toilets throughout school day

Year 3: use Top floor toilets (A) next to classroom during class time/Ground floor KS2 toilets during break time

Years 4, 5 and 6: Top floor toilets (B) near classrooms during class time/Ground floor KS2 toilets during break time

All children's and adult toilets cleaned between 12 and 2 and at the end of the school day; all children wash hands in classroom before going to the toilet and again before returning to the classroom.

Appendix E – Cover arrangements for staff absence / PPA etc

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HLTAs, TAs and SLT covering named and consistent classes in the event of staff absence and PPA wherever possible

Appendix F – Timetable for use of outdoor areas for play, learning etc

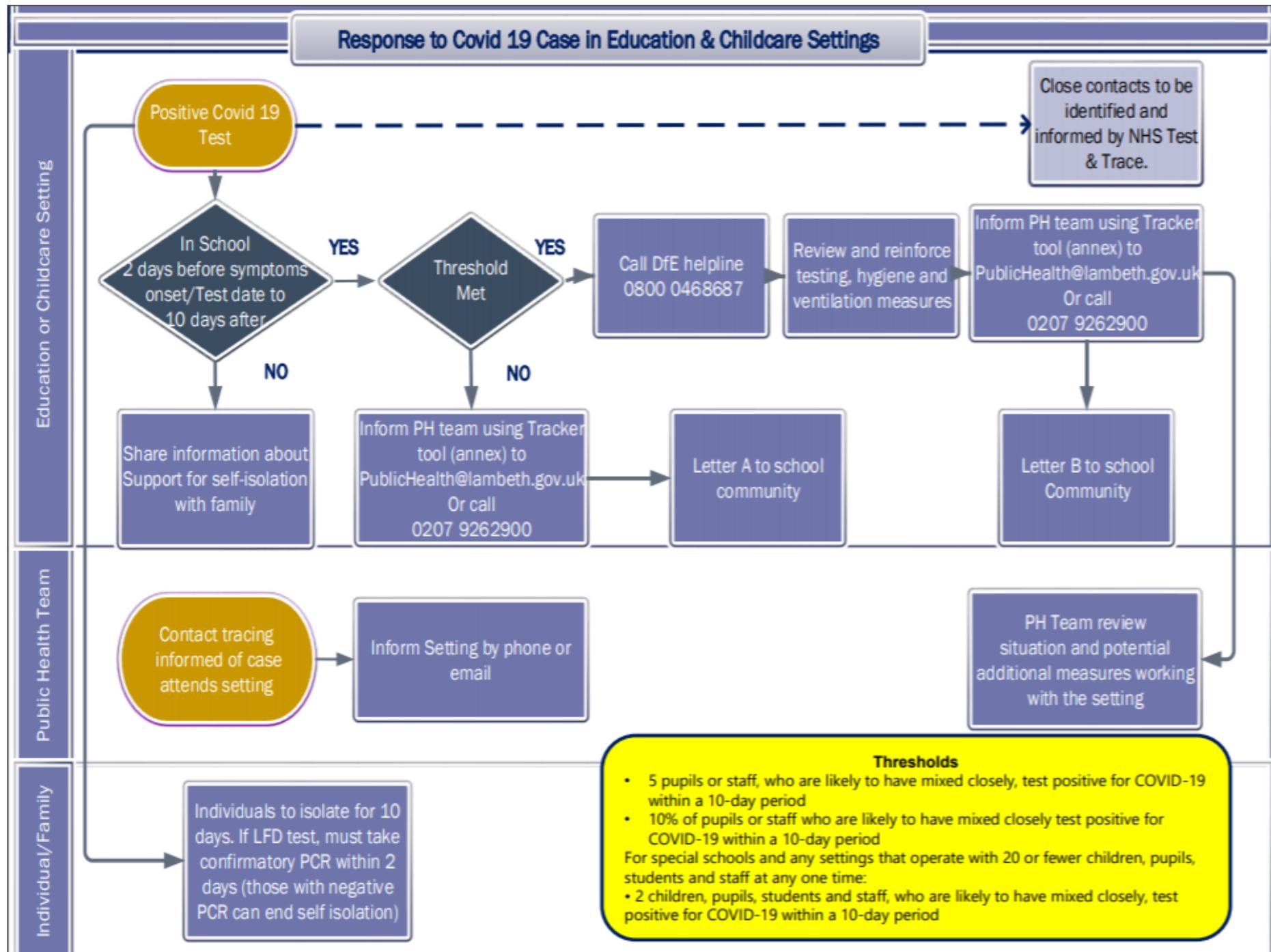
Reception and Year 1 have their own playgrounds. For Years 2 – 6, PE and MUGA play are timetabled. The large, spacious lower and upper playground are shared by Year 2 – 6 during morning break and lunchtime.

Appendix G – Timetable for staff room use

At Glenbrook there are multiple rooms available for staff break out use

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