

Update to Health and Safety Policy for Coronavirus – Covid-19

Approved by Trustees of Spring Common Academy Trust - 21st May 2020

Spring Common Academy will follow advice and guidance from the Government contained in:

Coronavirus (COVID-19): implementing protective measures in education and childcare settings (12 May 2020)

Actions for education and childcare settings to prepare for wider opening from June 2020 (12 May 2020)

Opening schools to more children and young people: initial planning framework for schools in England (12 May 2020)

Safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) (14 May 2020)

Actions for schools during Coronavirus outbreak (18 May 2020)

This policy has been developed collaboratively with the special schools and AP within Cambridgeshire and Peterborough with advice from LGSS Health, Safety and Wellbeing Team.

There are important actions that children and young people and those who work with them can take during the coronavirus outbreak to help prevent the spread of the Virus.

At Spring Common Academy we will employ a range of approaches to make the school as safe as possible. These can be seen as a hierarchy of controls that, when implemented creates an inherently safer system, where the risk of transmission of infection is may be substantially reduced.

What are the Hierarchy of Controls ?

- minimising contact with individuals who are unwell by ensuring that those who have coronavirus symptoms, or who have someone in their household who does, do not attend school
- cleaning hands thoroughly and more often than usually, following guidance from Public Health England and ensuring good respiratory hygiene by promoting the 'catch it, bin it, kill it', approach
- cleaning frequently touched surfaces often using standard products, such as detergents and bleach and increasing deep cleans
- minimising contact and mixing by altering the environment layout, groupings and timetables

Personal Protective Equipment (PPE)

PPE will be provided according to the tasks the employee will undertake and the school will complete a risk assessment for pupils with medical conditions and add information to care plans and school operating procedures.

PPE request for supply will be obtained through PPE@cambridgeshire.gov.uk

Wearing a face covering or face mask in schools is not recommended as government guidance and staff, children and learners will not be required to wear face coverings in school.

Advice states that face coverings worn by those who may not be able to handle them as directed may inadvertently increase the risk of transmission. Instead government guidance recommends changing societal habits using the hierarchy of controls, minimising contact and mixing, in addition to cleaning and hygiene for effective measures in controlling the transmission of the virus.

The majority of staff will not require PPE beyond what they would normally need for their work even if they are not always able to maintain a distance of 2 metres from others.

PPE is only needed when:

- Pupils' personal and intimate care routinely involves the use of PPE (gloves and aprons) due to their intimate care needs. This should continue in the same way, following protocols for best practise.
- In a few cases risk assessment for medical tasks may mean additional PPE will be required following advice from health. The School will then in collaboration with health and parents provide guidance and training for staff to support a pupil medical care plan (for example aerosol based procedures such as suctioning).
- A pupil becomes unwell with the symptoms of coronavirus while in their setting and needs care until they can return home. Staff should follow protocols outlined in the risk assessment and any additional guidance specific for their school.

Cleaning and Hygiene

The school will follow the <u>COVID-19</u>: <u>decontamination in non-healthcare settings</u> guidance.

Handwashing facilities will be allocated and access to hand sanitiser available in all classrooms and other school rooms. Pupils should clean hands on arrival, before and after eating with constant prompts and encouragement not to touch eyes and nose to prevent transmission.

Pupils will be encouraged to use tissues and throw away into bins.

All areas will be well ventilated as far as possible including toilets.

There will be a focus on cleaning surfaces that children will touch.

There will be cleaning schedules to be followed daily with compliance monitored. (See appendix for suggested cleaning schedule)

Frequent deep cleans are not a mandatory requirement unless you have a confirmed COVID case. Check the guidance below on what and how to clean after a symptomatic person has been in your setting and if a confirmed case has been in your setting.

When should a deep clean be organised?

After a confirmed COVID case. The area should be sealed off for 72 hours as possible then deep cleaned as per the guidance.

In a public area, follow the guidance of cleaning and disposing of waste and PPE for cleaner/member of staff. PHE and HPT can be contacted on this issue also as per the guidance should any issues arise.

Planned deep cleans should be communicated to staff and parents to build reassurance about the hierarchy of controls in relation to hygiene and infection controls.

What is the cleaning requirement if a person has Covid 19 symptoms beyond daily clean?

Using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles

 use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

Or

A household detergent followed by disinfection (1000 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, this should be checked and ensure that it is effective against enveloped viruses

Avoid creating splashes and spray when cleaning.

https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings

Is it ok to use Milton for sterilising activity mats and equipment? Or are other products recommended?

CLEAPSS recommend that goggles in science labs are steeped in Milton for at least 15 minutes after usage as per the instructions. School washable equipment and activity mats must have a cleaning schedule using a sanitising product.

Expelair / air conditioning units – ventilation systems in toilets or elsewhere. How should these be cleaned or serviced? Is it a requirement?

If the extract fans have multiple speeds then run units 24/7 on trickle speed. The fans should then run at rapid ventilation when operated by a PIR. The units should have a minimum 20 minute run on timer and then revert back to trickle vent. Light switch operation should only be used if there are no windows within the room. However a run on timer should still be used.

If the extract fan does not have multiple speed settings then maximum extract ventilation operated by a PIR with a minimum 30 minute run on timer. Light switch operation should only be used if there are no windows within the room. However a run on timer should still be used.

All recirculated systems should operate on full fresh air only, including air conditioning systems.

How is it best to clean toilets?

Shut all openable windows if mechanical ventilation is available.

Advice for using shared learning environments such as food tech, soft play, library, hydrotherapy pools.

Pools: Government closure of pools and leisure centres due to Coronavirus.

See guidance from Pool water treatment Advisory Group (PWTAG) and how to reopen pools safely to meet regulations and safety standards.

https://www.pwtag.org/quidance-on-temporary-pool-closure/

Food technology guidance from CLEAPSS

http://dt.cleapss.org.uk/Resource-File/GL344-Guidance-on-practical-work-in-a-partially-reopened-school-in-DT.pdf

Pupil should have access to their own bottle of hand gel as a sanitiser.

In food rooms or for food preparation, pupils may need to access fridges during a practical activity, it may be sensible for cool boxes to be used at each pupil workstation, rather than expecting pupils to move around the room to collect chilled items. Non-chilled ingredients should be at the pupil workstation prior to starting the activity.

Once the practical has finished, pupils should tidy up their equipment, wash their hands using hand sanitizer (or where possible soap and water) and then leave the room. Staff will then clear away equipment used.

At the end of any practical session, all equipment and spare material should be cleared away by the staff and wiped with a suitable cleanser prior to being stored away for future use.

Machines or other fixed equipment that has been used should be wiped clean and prepared for use in the next session.

Waste material should be placed in a suitable bin and removed from the room prior to the next session.

Shielded and clinically vulnerable children and young people

Pupils who have been classed as clinically extremely vulnerable due to preexisting medical conditions have been advised by GP or medical practitioner to shield. We do not expect these pupils to be attending school at present these pupils should continue to be supported at home by the NHS for their medical conditions.

A small number of pupils may be classed as clinically vulnerable using medical guidelines. Parents should inform school and follow medical advice provided.

A risk assessment will be conducted to ascertain if some pupils can reintegrate back into school. The CCG will monitor access to school for pupils with medical conditions and will work productively to mitigate any barriers to access to school for equalities impact.

Shielded and clinically vulnerable adults

Clinically extremely vulnerable adults with serious underlying health conditions (advised by their clinician or through a letter) should rigorously follow shielding measures to keep themselves safe. Staff in this position should not attend work and continue a dialogue with the school as the employer for regular keep in touch conversations.

Clinically vulnerable adults with some pre-existing conditions should follow advice to take extra care in observing social distancing and work from home where possible. If they cannot work from home school will provide safe on-site occupational roles related to the aims of the school, following social distancing quidance.

Living with a shielded or clinically vulnerable person

According to government guidance, if a pupil or member of staff lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), they can attend the school.

If a pupil or member of staff lives with someone who is clinically extremely vulnerable they should follow the advice in the *COVID-19: guidance on shielding and protecting extremely vulnerable persons from Covid-19.* They should only attend if stringent social distancing can be adhered to and we would generally not expect these individuals to attend the school.

Minimising contact and mixing

It is acknowledged that many pupils at Spring Common Academy due to their learning disabilities will not be able to consistently remain 2 metres apart or have understanding of the reasons for this. If, carrying out a risk assessment ascertains that mitigations cannot be put in place to provide safety, in these rare circumstances children may be advised to stay at home. For those children in this category with a social worker, the school will take and approach of 'best endeavours' to provide a placement unless the Multi – agency risk assessment concludes they will be safer at home.

Through school risk assessment we will introduce measures working through the hierarchy of controls. It is important to reduce contact between pupils and with staff as much as possible to reduce risk of transmission of coronavirus. We will do this by implementing the following changes to operational procedures:

Operating procedures:

- Creating small, consistent groupings (bubbles) which, where possible, stay the same. (The number per classroom and staffing ratios to be based on school based risk assessment linked to special educational needs of pupils and size of room).
- Assigning staff which stay the same each day including allocation of additional staff to cover absence and breaks.
- School meals and snack times requirements for minimising mixing and social distancing for bubbles.
- First Aid rooms allocated to be planned in event of child presenting Covid 19 symptoms to await collection. A PPE grab bag will be provided for the safety of staff. After departure the room will be closed and left to follow cleaning procedures for diagnosed case and will involve a deep clean.
- Keeping to allocated rooms
- Reducing transitions and movements within the building
- Staggering break and lunch times to prevent overlap with other groups
- Providing individual equipment for each pupil.

 Protocols for entry and exit to buildings at start and end of day including transport (this will be monitored for compliance to Education Transport guidance for contractors). Special schools will have site-based procedures

Operating procedures for staff will be contained in the risk assessment and should be read with this Policy.

Reporting to RIDDOR and HSE for Coronavirus incidents:

Local Authority schools and Academies who buy back LGSS health, safety and wellbeing services will report all COVID incidents via the usual HSE incident reporting system:

https://reportincident.co.uk/Cambridgeshire/1

The Health, Safety and Wellbeing Team will make the call if the incident needs to be reported under RIDDOR.

The guidance on what is RIDDOR reportable to the HSE is below. Reasonable proof /evidence will need to be provided with the disclosure that the virus was contracted whilst at work.

https://www.hse.gov.uk/news/riddor-reporting-coronavirus.htm

Dangerous occurrences

RIDDOR regulation 7, Schedule 2 – Section 10 on legislation.gov.uk

If something happens at work which results in (or could result in) the release or escape of coronavirus the school must inform the Health, Safety and Wellbeing Team to enable this to be reported as a dangerous occurrence. Any incident should be documented with evidence and the LGSS Health, Safety and Wellbeing team will provide advice.

Cases of disease: exposure to a biological agent

RIDDOR regulation 9 (b) on legislation.gov.uk

If there is reasonable evidence that someone diagnosed with COVID-19 was likely exposed because of their work you must report this as an exposure to a biological agent using the case of disease report to the LGSS Health, Safety and Wellbeing Team.

An example of a work-related exposure to coronavirus would be: a health care professional who is diagnosed with COVID-19 after treating patients with COVID-19 reporting to duties within a school site.

Work related fatalities

Read about RIDDOR regulation 6 (2) on legislation.gov.uk

If a worker dies as a result of exposure to coronavirus from their work and this is confirmed as the likely cause of death by a registered medical practitioner, then you must report this as a death due to exposure to a biological agent using the 'case of disease' report form. LGSS Health, Safety and Wellbeing Team will assist to report workplace fatalities to HSE by the quickest practicable means without delay and send a report of that fatality within 10 days of the incident.

Staff member or pupil becomes unwell at school

Staff will continue to be vigilant about health and well-being of staff and pupils.

If anyone becomes unwell with a new, continuous cough or a high temperature or pupil able to tell you they have anosmia (no taste and smell) they must be sent home and advised to follow the *COVID-19*: guidance for households with possible coronavirus infection.

If a pupil is awaiting collection they will be isolated as outlined in the school risk assessment and guidance for staff.

In a medical emergency 999 should be called.

If a member of staff has helped someone who is unwell with a new, continuous cough or a high temperature, they do not need to go home unless they develop symptoms (in which case a coronavirus test is available). They should wash their hands thoroughly for 20 seconds. The affected area should be cleaned according to the Health and Safety policy and operating guidance.

Confirmed case of coronavirus

When a pupil or staff member develops symptoms compatible with coronavirus they should be sent home and advised to self-isolate for 7 days. Their fellow household members should self-isolate for 14 days. All staff and pupils will have access to a test if they display symptoms. See:

https://www.nhs.uk/ask-for-a-coronavirus-test

Where the pupil or member of staff tests negative they can return to their setting and household members can end their self-isolation.

Where the pupil or staff member tests positive the rest of their school group should be sent home and advised to self-isolate for 14 days and seek advice about a test. The other household members of that wider group do not need to self-isolate unless the pupil or staff member they live with subsequently develops symptoms.

National Test and Trace programme

Current advice states that Public Health England local Health Protection teams may conduct a rapid investigation and advise the school if cases are diagnosed in the school. Because the school will be observing guidance on infection prevention and control to reduce risk of transmission. Closure of the whole school will not be necessary,

To access testing parents will be able to use the 111 online coronavirus service if their child is aged 5 or over.

https://www.nhs.uk/ask-for-a-coronavirus-test

For children aged under 5 parents are advised to call the 111 service and follow guidance.

This Policy links to the following related documents:

Public Health England / Coronavirus

HSE /Coronavirus

School Risk Assessment

First Aid Policy

Intimate Care policy

Administration of medicines Policy