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|  | | **Department LINK ACADEMY TRUST**  **Landscove C of E Primary School** | **Academy Risk Assessment** | **RA100** | |
| **Name and Address of Academy**  **Landscove C of E Primary School, Church Cross, Landsove, Nr Ashburton TQ13 7LY** | | | |
| **Person(s)/Group at Risk**  **All Year groups (children), staff and parents** | | | Initial Assessment **X**  Review X  Following Incident | | |
| **Activity/Task/Process/Equipment**  **SEPT 2021**  **This risk assessment explains the actions school leaders will take to minimise the risk of transmission of COVID-19 in their school Stage 4 Road Map September 2021. This includes public health advice, endorsed by Public Health England (PHE).**  **3rd Jan 2022**  **The range of preventative measures outlined below are based on the latest Government guidance. This is based on the school implementing proportionate control**  **measures as outlined in the guidance's SYSTEMS OF CONTROL based on Prevention and Response. These measures only serve to minimise the risk of Covid-19 spreading**  **in our setting. School cannot ensure a virus free zone** | | | **Date of Assessment** **28.08.20**  **Assessor(s) Jill Ryder Academy Head**  **Reviewed and updated**  **17th Sept 2020**  **31st October 2020**  **5th November 2020**  **3rd March 2021**  **7th September 2021**  **3rd Jan 2022**  This document is to remain under constant review due to the fast-changing nature of DfE / Government guidance in response to the challenges posed by Covid-19. | | |
| **Significant Hazard and possible Outcomes**  **/injuries** | **Control Measures in Place** | | | **Are any additional measures or actions required? (if yes put on the Action Plan)** | |
| **Yes** | **No** |
| **Is government advice being regularly accessed, assessed, recorded and applied?** | * E.G DfE advice is checked daily. * risk assessment is a live document and will be changed according to latest guidance. new date will be applied and RA will be sent to all staff after any alteration * changes are reviewed by senior leadership (sent to CEO) * Trustees interrogate risk assessments   ***DfE daily email-*** [*DfE - COVID daily email subscription service (office.com)*](https://forms.office.com/Pages/ResponsePage.aspx?id=yXfS-grGoU2187O4s0qC-QqN_lFznWdElvOZAsgLa61UMlVaSEZWQVA3RDE1VU05SlVOQVFDNVlINy4u)  ***Posters and promotional material -*** [*https://coronavirusresources.phe.gov.uk/back-to-school/resources/*](https://coronavirusresources.phe.gov.uk/back-to-school/resources/)  ***NHS resources and videos***   * [*Handwashing for teachers*](https://www.youtube.com/watch?v=4ij1I0OB2hk) * [*Handwashing for children*](https://www.youtube.com/watch?v=S9VjeIWLnEg) * [*Coronavirus factsheet for kids*](https://www.youtube.com/watch?v=iMR3WPCRuAI) * [*PPE Donning and Doffing advice*](https://www.youtube.com/watch?v=-GncQ_ed-9w&feature=youtu.be)   ***Other resources and videos***   * [*COVID-19: the facts | Scouts*](https://www.scouts.org.uk/coronavirus/covid-19-the-facts/) * ***eBug*** [*https://e-bug.eu/*](https://e-bug.eu/) * ***PHE webcast -*** [*Breaking the chain of infection*](https://www.powtoon.com/c/bBEyP5CIpEt/1/m) | | |  | **X** |
| **Staff Training: using and monitoring new practices to reduce risk of COVID19 transmission** | * Training of all staff via briefing prior to start of term – to include contents of this RA,(Sept & January) * Ensure there are opportunities for all staff to raise concerns / make suggestions~ via briefings | | |  | **X** |
| **Whilst DfE guidance removes the need for schools to use ‘bubbles’ PHE advice is if you can keep mixing to a minimum** | * **School day will revert to normal times**: * 8:45-8:55 drop off * 3:25/30 pick up(EYFS/all other year groups) * **Parents will drop & pick up Y1-6 children in the back playground** * **Staff will continue to meet children EYFS children at the door/front gate** * **Access to the school building will be kept to a minimum**   **Should there be an outbreak at school Bubbles may be temporarily re-introduced.** | | |  | **X** |
| **Keep occupied spaces well ventilated** | | | | | |
| **Are classes well ventilated?**  **Poorly ventilated spaces leading to risks of coronavirus spreading**  **Ventilation to reduce transmission**  **Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak and CIBSE COVID-19 advice provides more information.**  **DfE is working with the Scientific Advisory Group for Emergencies (SAGE) and NHS England on a pilot project to measure CO2 levels in classrooms and exploring options to help improve ventilation in settings where needed.** | * Heating used as necessary to ensure comfort levels are maintained when the building is occupied. * Keep windows open wide enough to provide some natural background ventilation and open internal doors to increase air flow. * Open windows fully when rooms are unoccupied for longer periods to purge the air (e.g. lunch times and before and after school). * Action taken to prevent occupants being exposed to draughts. For example, partially open high-level windows as oppose to low-level windows, close external doors and arrange the furniture if appropriate and possible. * Use fans for good air circulation. * Occupants encouraged to wear additional, suitable indoor clothing. (**If they have to wear coats, scarves and other outdoor clothing the room would be considered too cold and the above steps must be considered).** * Ensure staff meetings and insets are in rooms with suitable and sufficient ventilation * Opening internal doors can also assist with creating a throughput of air(not fire doors) | | |  | **X** |
| **Cleaning and reducing contamination** | | | | | |
| **Cleaning** | * Enhanced cleaning schedule is in place * Reduced clutter and removed difficult to clean items to make cleaning easier. * Cleaning using standard cleaning products such as detergents and bleach, paying attention to all surfaces but especially ones that are touched frequently, such as door handles, light switches, work surfaces, remote controls and electronic devices. * Surfaces that are frequently touched and by many people in common areas to be cleaned twice a day. * Avoid sharing work equipment by allocating it on a personal basis or put cleaning regimes in place to clean between each user. * Identify where you can reduce people touching surfaces, for example by leaving doors open (except fire doors) or providing contactless payment(ParentPay). * Keep surfaces clear to make it easier to clean and reduce the likelihood of contaminating objects. * Provide more bins and empty them more often. * Toilets and communal areas to be cleaned regularly * Sanitising spray and paper towels to be provided in classrooms for use by members of staff. If using cloths – disposable or appropriate washing and drying process. * Thorough cleaning of rooms at the end of the day. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. * PHE has published guidance on the cleaning of non-healthcare settings * <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings> | | |  | **X** |
| **Ensure good hygiene for everyone** | | | | | |
| **Sufficient handwashing facilities for staff and pupils and time to do complete hygiene routines**  **Teach children to wash hands** | **Whilst DfE guidance removes the need for schools to use ‘bubbles’ PHE advice is if you can keep mixing to a minimum**, **it does reduce transmission along with**:  • COVID-19 posters/ signage displayed.  • Frequent and thorough hand cleaning is regular practice.  • Pupils and staff to clean their hands when they arrive at school, when they return from breaks, when they change rooms and before and after eating.   * Hand sanitiser points throughout common use areas in school: entrance points to school, entrance point to class rooms, toilets and the office. * Sinks available in Classes. We also provide supervised access to hand sanitiser in classrooms. * Planned regular access to facilities throughout the day. * Ensured enough hand wash and sanitiser available based on what we have learned from usage to date. * Frequent hand cleaning as part of normal routine. * Build routines into behaviour expectations and school culture~ via PSHE, ebug and daily expectations. * Review the guidance on hand cleaning and introduce handwashing songs for younger children. Ensure that help is available for children and young people who have trouble cleaning their hands independently. See guidance and resources available at e Bug. * Consider risks around ingestion of sanitiser and where this is a risk substitute for skin friendly sanitiser wipes for young children / those with complex needs. * Hand sanitiser will be available in each class * Children will be told to clean their hands on arrival at school, before and after eating, and after sneezing or coughing * Staff will encourage children not to touch their mouth, eyes and nose * Staff and pupils will be regularly supervised and checked to ensure they are complying with hygiene rules JR to do this. | | |  | **X** |
| **Good respiratory hygiene** | Respiratory hygiene   * The ‘catch it, bin it, kill it’ approach continues to be very important. * The e-Bug COVID-19 website contains free resources for you, including materials to encourage good hand and respiratory hygiene. * Ensure lidded bins for tissues are emptied throughout the day. Follow guidance on disposal of waste ~ lunch time staff to empty bins * Lidded bins are available in each classroom(class teachers to ensure bins are placed in classrooms by Monday 7th Sept) * N.B. please note that face covering guidance has changed due to Devon becoming an ‘Enhanced Response Area’, the following points describe the situation outside of ERA status. * Although from Step 4, face coverings will no longer be advised for pupils, staff and visitors, persons choosing to wear face coverings as a precaution will not be deterred when outside the classroom. * Where staff are in crowded spaces, face masks may be recommended (but not required). * There are good hygiene measures that can be used in: * https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2021/08/spotty-book-2021.pdf * https://www.england.nhs.uk/south/info-professional/public-health/infection-winter/schools-and-nurseries-guidance/ * DCC Health and Safety Arrangements: - Infection Control HS26 | | |  | **x** |
| **Conditions for use of fluid resistant face mask and other equipment when dealing with a symptomatic child are clear and understood by staff.** | * If a child, young person or other learner becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home a face mask should be worn by the supervising adult if a distance of 2 meters cannot be maintained. * If contact with the child or young person is necessary, then gloves, an apron and a face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn Ensuring that fluid resistant face masks are available for all schools and that a supply is maintained. * 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 | | |  | **X** |
| **Staff use of PPE** | * All qualified first aiders are available to provide essential first aid care. A minimum of masks and gloves should be used for first aid, and visors/glasses and aprons used if there is heightened risk of contamination (e.g. nosebleed, sickness, diarrhoea etc.) * PPE should be used for ALL personal/intimate care and this should be renewed between every child. * This PPE is single use and should be disposed of properly as per guidance. * PPE can be worn by all staff in school should they choose and school will make this available however it is not advised in classrooms. It is advised for staff to wear masks in communal spaces when not eating or drinking. | | |  | **X** |
| **Staff issues** | | | | | |
| **Lateral Flow Testing:**  **Accessing testing arrangements are clear for all staff**  **Face covering** | * Tests will be carried out twice weekly by all staff coming into school 3-4 days * apart. All tests will be recorded on Gov website as well as the schools * recording form. * tests will be done on a Sunday morning and Wednesday evening to allow the   Academy Head time to coordinate cover and gain support from PHE   * It is not mandatory * **DFE recommend that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas.** Health advice continues to be that children in primary schools should not be asked to wear face coverings.   **When removing a face covering, staff & visitors should:**   * wash their hands thoroughly with soap and water for 20 seconds or use hand sanitiser before removing * only handle the straps, ties or clips * not give it to someone else to use * if single-use, dispose of it carefully in a household waste bin and do not recycle * once removed, store reusable face coverings in a plastic bag until there is an opportunity to wash them. * if reusable, wash it in line with manufacturer’s instructions at the highest temperature appropriate for the fabric * See Circumstances where people are not able to wear face coverings for exceptions to this. * **DFE advise: Face coverings do not need to be worn when outdoors**. | | |  | **X** |
| **Accessing testing arrangements for all staff** | All staff are aware of the Guidance on the new asymptomatic testing programmes taking place in schools are on a shared document platform hosted by DfE, including FAQ, webinars and step-by-step ‘how to guides. .   * **For primary schools** - [Primary Schools Document Sharing Platform - Google Drive](https://drive.google.com/drive/folders/1X4fLxy6_ppmpmKrv3hT2M6cduAN_GS54). | | |  | **X** |
| **Symptoms** | * We deliver **strong messaging** about signs and symptoms of Covid-19, isolation advice and testing to support prompt isolation of suspected cases | | |  | **x** |
| **Vaccination** | * We encourage **vaccination** uptake for staff | | |  | **x** |
| **Dealing with confirmed case/ cases and outbreak.** | **Case (possible vs confirmed case)**  Possible: anyone with either a high temperature, a new, continuous cough or a loss of, or change to, your sense of smell or taste (and awaiting a test)  Confirmed: PCR or LFD test positive case of COVID-19 with or without symptoms.  **Information on the changes to the self-isolation period for individuals who test positive for COVID-19**  **Since Wednesday 22 December, the 10 day self-isolation period for people who record a positive PCR test result for COVID-19 has been reduced to 7 days in most circumstances, unless you cannot test for any reason.**  **Individuals may now take LFD tests on day 6 and day 7 of their self-isolation period. Those who receive two negative test results are no longer required to complete 10 full days of self-isolation. The first test must be taken no earlier than day 6 of the self-isolation period and tests must be taken 24 hours apart. This also applies to children under 5, with LFD testing at parental or guardian discretion. If both these test results are negative, and you do not have a high temperature, you may end your self-isolation after the second negative test result and return to your education setting from day 8.** | | | | |
| **Close Contact requirements** | **Daily testing for close contacts of COVID-19**  People who are fully vaccinated, or children and **young people aged between 5 and 18 years** **and 6 months**, identified as a close contact of someone with COVID-19, **should take an LFD test every day for seven days and continue to attend their setting as normal, unless they have a positive test result or develop symptoms at any time.**  Children under 5 are not being advised to take part in daily testing of close contacts. If a child under 5 is a contact of a confirmed case, they are not required to self-isolate and should not start daily testing. If they live in the same household as someone with COVID-19 they should limit their contact with anyone who is at higher risk of severe illness if infected with COVID-19, and arrange to take a PCR test as soon as possible. **They can continue to attend an education or childcare setting while waiting for the PCR result. If the test is positive, they should follow the stay at home: guidance for households with possible or confirmed COVID-19 infection**.  Close contacts aged under 18 and a half, and those aged 18 and a half and double vaccinated will not be required to self-isolate.  Where students/staff had been notified they were contacts of possible Omicron variant cases of Covid, providing they are asymptomatic and have not tested positive for Covid, they are able to now stop self-isolating and do daily LFD testing instead.  Where staff and secondary age students are not close contacts they should be encouraged to continue with regular twice weekly testing.  Staff who are not vaccinated should be encouraged to take up the offer of vaccination (contact details for staff in the NHS who can offer supportive conversations with anyone who is hesitant are included in the toolkit). Booster vaccines are now bookable and should be encouraged for staff. | | |  |  |
| **Cases -staff** | For all cases relating to staff, please also see the guidance for workplaces: For cases in staff, settings should call the Self-Isolation Service Hub on 020 3743 6715 as soon as they are aware. Employers will need to provide the 8-digit NHS Test and Trace account ID of the person who tested positive, alongside the names of co-workers identified as close contacts to ensure they are registered with NHS Test and Trace and receive the necessary public health advice. | | |  |  |
| **Cases- pupils** | Children who are unwell should not attend the setting and should remain at home until their acute symptoms resolve (+24 hours for a fever).  IF these symptoms develop into cough, temperature, changes to taste and smell, should isolate and test.  IF test negative to COVID-19, still need to remain at home until at least 24 fever free and acute symptoms resolved.  **Parents and settings should not try and ‘second guess’ diagnosis – if have the key symptoms, isolate and test.**  **Examples of acute symptoms with which children should not attend school/nursery include fever, muscle aches, hacking cough.**  Follow public health advice on managing confirmed cases of COVID-19 see Schools COVID-19 operational guidance - GOV.UK (www.gov.uk)  Ensure the case isolates for 10 days  Following a pupil PCR positive NHS Test and Trace will speak to the case (or parent/carer) to identify close contacts and advice on isolation as required and to get a PCR test  Staff and pupils who do not need to isolate should continue to attend school as normal  Clean and disinfect rooms the case was in, using appropriate PPE  Case and any isolating contacts can return once isolation period is completed, as long as they are well  Escalation criteria:  If you have any infection control concerns or questions call the DfE Coronavirus helpline on 0800 046 8687 for advice. If your setting meets the following thresholds for extra action (outlined in the Contingency Framework), the DfE helpline will escalate to the SW PHE Health Protection Team when a risk assessment is required. DCC Public Health Team can also assist. | | |  |  |
| **Case Thresholds** | For most education and childcare settings:   * 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period. * 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period. * There are any admissions to hospital for COVID-19. * You are having problems implementing the control measures OR you have applied the control measures and are still seeing a significant rise in cases. | | |  | **x** |
| **Contingency framework and outbreak control measures** | Schools are required to update their contingency plan (or outbreak management plan) and describe how they will respond if children, pupils, or staff test positive for COVID-19, how they will operate if they are advised to reintroduce any measures to help break chains of transmission. Such measures should be considered in addition to the day-to-day control measures being implemented by schools, PHE SW Health Protection Team have defined 4 levels:  Outbreak management plan in place – see website  School will adopt a flexible and responsive approach to implementing additional measures in line with Covid-19 cases in school. If the number of positive cases increases substantially, it will be sensible to re-introduce a range of previous measures to help prevent virus transmission.  **These could include**:  Teaching outdoors as much as possible  Improving/implementing additional cleaning regimes and ventilation  Strengthening communication to encourage home testing.  Wearing face visors for staff and adults on site  Increasing frequency of staff testing.  Re-introducing separate bubbles/zones/facilities.  Re-introducing staggered drop off and pick up times which are further apart.  Minimising staff contact in communal areas.  Restrict Educational visits, on-site external providers e.g. peripatetic music teachers.  Restricting attendance and implementing remote learning for specific classes/groups to break the chain of transmission (as a last resort in extreme cases)  Restricting clubs and assemblies | | |  | **x** |
| **Pupil / Staff related issues** | | | | | |
| **Mental Health and Wellbeing** | * Wellbeing lead in each school able to support individual pupils should the need arise. * Curriculum/PSHE lessons within the programme of collective worship are provided weekly. * Managing mental health, well being and dealing with anxiety & trauma training for all staff * Parent resources available to support families with any wellbeing concerns which are additionally on the school website. * Staff: Weekly meetings to check-in with whole team/groups to be conducted virtually when the need arises. Regular individual check-ins by SLT. Continue with a range of social activities where possible for children and staff. * Clear messaging on expectations for attendance and identification of those who may be disengaged, disadvantaged or vulnerable and where catch up funding may need to be applied.   • IIH support available within Trust | | |  | **X** |
| **Vulnerable groups who are clinically, extremely vulnerable**. | All CEV children and young people should attend their education setting unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their GP or clinician not to attend. Further information is available in the guidance on [supporting pupils at school with medical conditions.](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3)  Whilst attendance is mandatory, we will work collaboratively with families to reassure them and to help their child return to their everyday activities. Discussions will have a collaborative approach, focusing on the welfare of the child or young person and responding to the concerns of the parent, carer or young person  [FAQ](https://eur02.safelinks.protection.outlook.com/?url=https%3A%2F%2Felearning.rcgp.org.uk%2Fpluginfile.php%2F170159%2Fmod_resource%2Fcontent%2F1%2FCYP%2520FAQs%2520FINAL.pdf&data=04%7C01%7Cmartin.bevan%40devon.gov.uk%7C4c32b3425e3b4968449e08d968b729d6%7C8da13783cb68443fbb4b997f77fd5bfb%7C0%7C0%7C637655958152167642%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=NJXoOumKtbqOiwpvJ6R0X2l8SOPjpBjz9xKRJAae4Gs%3D&reserved=0) | | |  | **x** |
| **Assessment of all staff, including high risk staff with vulnerable / shielding family member, underlying health conditions or other risk factors** | * A risk assessment will be undertaken with clinically extremely vulnerable and clinically vulnerable. A risk assessment will also be undertaken (or reviewed/updated if one was previously undertaken) with staff who may be anxious about returning to school and/or due to the increased numbers. The ‘Risk assessment for all staff including vulnerable groups’ can be used to aid and record this assessment -[*https://devoncc.sharepoint.com/:w:/s/PublicDocs/Education/ESoXeZkAQylLupPG5VVG6yQB2iEFDD4pgkko5qBbtOSEkw?e=040Qiy*](https://devoncc.sharepoint.com/:w:/s/PublicDocs/Education/ESoXeZkAQylLupPG5VVG6yQB2iEFDD4pgkko5qBbtOSEkw?e=040Qiy) | | |  | **x** |
| **Pregnant staff** | [Coronavirus (COVID-19): advice for pregnant employees - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/coronavirus-covid-19-advice-for-pregnant-employees/coronavirus-covid-19-advice-for-pregnant-employees)  - should have a risk assessment in place: [Coronavirus (COVID-19) infection and pregnancy (rcog.org.uk)](https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/) can support risk assessment.  - a more precautionary approach advised for those >28 weeks pregnant or for individuals with underlying health conditions that place them at greater risk. | | |  | **x** |
| **Safeguarding all pupils** | * Back playground is secure. * The front door remains locked during school hours * Safeguarding lead info is available to all staff: * Landscove: DSL: Jill Ryder 01803 762656 DDSL: Chloe McFadzean   Broadhempston: DSL Jill Ryder, DDSLs: Karen Barlow & Therese Carwithen 01803812689  Mob: 07927794985  Should the above be unavailable for any reason, please contact one of the other DSL’s within our Trust:-  Bearnes – Dan Turner 01626 353980  Cheriton Bishop – Alex Waterman 01647 24817  Diptford – Lizzie Lethbridge 01548 821352  Drakes - Pete Halford 01395 443871  Harbertonford – Anne Burns 01803 732352  Hennock – Vic Pooler 01626 833233  Otterton - Pete Halford 01395 568326  Stoke Gabriel – Alice Eeles 01803 782469  Tedburn St Mary – Andy Keay 01647 61338  Yeoford – Alex Waterman 01363 84234  Devon County Council Local Authority Designated Officer (LADO) can be reached on 01392 384964. | | |  | **X** |
| **Transport** | | | | | |
| **Transport to/from school** | * DCC: Following discussions with colleagues at Public Health Devon and the Department for Education, and with the aim of minimising disruption to education in the Autumn term, DCC are asking that students aged 11 and over continue to wear face coverings when travelling on school transport until further notice. * DCC recognise that some medical conditions or additional needs may make this not possible - exemption passes are available - please contact the school directly who will be able to issue these. We would also ask that: * Pupils should wash/clean their hands before boarding home to school transport, and when arriving at school or home. * Pupils should respect the driver’s personal space and hold back from entering the vehicle until the driver has indicated it is safe to do so, they should then board one by one in an orderly manner. * It is still recommended that face coverings are worn by all passengers, unless exempt (www.gov.uk/ guidance/coronavirus-covid-19-safer-travel-guidance-forpassengers#face-coverings) | | |  | **x** |
| **Curriculum** | | | | | |
| **Educational visits** | * Staff will undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment. [General guidance](https://www.gov.uk/government/publications/health-and-safety-on-educational-visits) about educational visits is available and is supported by specialist advice from the [Outdoor Education Advisory Panel (OEAP).](https://oeapng.info/) | | |  | **x** |
| **Physical activity in schools** | * PE specialist will attend Landscove on a weekly basis. A subject specific risk assessment is in place for this provision. * Children will be asked to come to school in PE kit and stay in this kit all day. This reduces the number of bags brought from home to school and the need to provide additional changing facilities | | |  | **x** |
| **Communications with parents & others** | | | | | |
| **Communications to parents and staff** | * Regular communications in place | | |  | **x** |
| **Oversight of the governing body & Trustees** | | | | | |
| **Lack of governor oversight leads to the school failing to meet statutory requirements** | * The governing body & Trustees continue to meet regularly via online platforms. * The governing body & Trustee agendas are structured to ensure all statutory requirements are discussed and school leaders are held to account for their implementation. | | |  | **x** |

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| **Assessor’s Recommendations - Additional Control Measures or Actions** | | |
| **List Actions / Additional Control Measures** | **Date action to be carried out** | **Person Responsible** |
| Share this RA with all staff  Place on school website to keep all parents fully informed  Ensure updates and reviews follow latest government/DFE guidelines | Update shared 4th January 2022  As DFE guidance is published | Jill Ryder  Jill Ryder/Amanda Gran  Jill Ryder |

**Signed: Academy Head: Date 3rd January 2022**

The outcome of this assessment should be shared with the relevant staff

A copy of the completed assessment to be kept on file and copied to the Health & Safety Co-ordinator