

TRIANGLE Risk Assessment for full September opening - Covid 19 - updated 18/09/2020

Lambeth risk assessment scale included at the end of this document for reference for risk rating.

Staff can wear visors if they wish**Not to close if potential case - wait for test results****No lending library/books**

Area of risk	Risk description	Risk assessment see key			Risk treatment measure/s	Residual risk assessment			Outcome
		Occurrence	Harm	Risk rating		Occurrence	Harm	Risk rating	
Reopening without sufficient planning	If re-opening is not managed clearly and efficiently then anxiety levels will rise. Governors views sought on reopening the schools.	3	3	9	<p>Clear plan to fully open -</p> <ul style="list-style-type: none"> • SLT meeting to discuss options held • Risk assessment sent to Triangle staff to review and discuss on inset. <p>Email to ISC governors giving brief information about full opening. Invitation to ISC governors to attend a virtual meeting to discuss risk assessment.</p> <p>Send a copy of risk assessment to union representatives to review and make any comments.</p> <p>Risk assessment seen by Lambeth team.</p>	2	2	4	Medium
	Minimising the number of children, staff and parents gathering indoors at any one time.	3	3	9	<p>Main reception area to be closed except for parents settling children. Maximum 2 parents in this space and ensure social distancing.</p> <p>Ensure variations on start and end times. This will need to be reviewed as we settle in the new children. Children dropped and collected at the main gate by key person. Children enter school through fire doors.</p> <p>Each nursery space has their own entry/exit doors and will have a separate outdoor space.</p> <ol style="list-style-type: none"> 1. Main nursery (pod 1) - main classroom and playground area. Families to drop children at the main gate. Each story group to have a different drop off and collection time. 2. Nurture space/2 year provision (pod 2) - Children collected from the gate and brought to the classroom. Separate outside space. <p>Only full time children will have lunch and will need less staff in the space. Yet undecided about lunch provision (hopefully move to cooked meals as soon as possible)- will depend on numbers of children and what the kitchen can provide (Maybe around 12 children)</p>	1	2	2	Low
Staff anxiety about returning to work	Staff will be concerned about returning to work in a more regular/normal way.	3	2	6	<p>Staff meeting and ongoing review and discussion to support all staff to gain insight into concerns and to seek solutions to potential problems.</p> <p>Clear procedures outlined and structure created, to be shared with all staff on inset day.</p>	2	2	4	Medium

					<p>Staff meetings held in smaller groups within class teams, if needed. Each team to share structure/concerns/problem solving. Staff should be encouraged to speak with their union and seek advice as necessary. All staff to communicate clearly with Luke/SLT to ensure any concerns/anxieties are managed and supported.</p> <p>Staff encouraged to work to their working hours, to minimise staff passing through shared spaces.</p> <p>Office and premises staff to space out across the office, or use other spaces so routes are clear.</p> <p>Designated staff rooms for different staff teams. Notices on doors to limit numbers in rooms. Admin staff to have sole use of computers, to ensure minimal cross contamination. Disinfectant wipes/Dettol spray provided to wipe down spaces.</p> <p>Federation SLT to work closely together to ensure senior leaders have support to manage risk assessments and wellbeing of all staff (including their own). Weekly SLT meetings to discuss ongoing government advice and updates.</p>				
	Risk to clinically vulnerable and extremely clinically vulnerable staff	3	3	9	<p>Triangle has 2 members of staff classified with ongoing medical conditions. Luke to meet with both members of staff and to complete verbal risk assessment for their return to work if guidance says so.</p> <p>Staff are encouraged to share their concerns/ worries about their own health, and the risk to those in their home.</p> <p>Staff to have the option of wearing a visor while at work (this must be provided by the staff member and used solely while at work, not for use outside of work due to possible cross contamination).</p> <p>Consideration given to BAME staff, regarding research.</p>	1	2	2	Low
Safeguarding considerations	Designated lead on site to ensure safeguarding policy can be maintained.	3	3	9	EHT and HOS to remain safeguarding lead. Additional designated leads used to support starts and ends of day.	1	1	1	Low
	Support for chn still not attending	2	2	4	<p>KP regular contact and some ideas to play at home.</p> <p>Music therapy interactive sessions held weekly with targeted families.</p>	2	1	2	Low
	Children's wellbeing - separation anxiety / trauma / bereavement impact	3	2	6	<p>Think carefully about deployment of staff and that there are familiar staff for all children.</p> <p>Consider settling in process for all children, and managing social distancing. Careful planning of resources, in order to provide familiar items.</p> <p>Key people to ensure that they have a conversation with all parents before ch start so that they are aware of any changes/ concerns surrounding the ch. This is to be done by phone where possible.</p> <p>No home visits - these are to be in school inductions to enable kp to get to know new families.</p> <p>Updates and daily feedback to parents to be done by phone if necessary, especially where this is a longer conversation, to discourage parents from being in the building longer than needed, or in close contact with staff.</p> <p>Create visual timetables for amended sessions for all children. Provide clear structure to parents prior to starting, and expectations.</p> <p>Use of books and stories to support ch through any issues they may have. Also contact with external agencies for extra support.</p>	2	2	4	Medium

	Additional adults on site - drop off and collection	3	3	9	<p>All children to be dropped at the main gate and brought into school by kp. Staggered drop off and collection times - prompt collection and drop off and no adults hanging around at gate. Signage in place to remind parents about keeping a 2m distance between each other. Staff need to position themselves with a 2m space, when having conversations with parents. Could use EExAT to let parents know key points from the day.</p> <p>If a child has an accident, adults will; be contacted by phone/text to inform them. They will need to sign the accident book at the end of the day at the gate by kp.</p> <p>Drop off and collection times from the main gate -</p> <table border="1" data-bbox="882 512 1583 847"> <thead> <tr> <th>Key group</th> <th>Drop off time</th> <th>Collection time</th> </tr> </thead> <tbody> <tr> <td>Nurture space</td> <td>9 am</td> <td>12 pm</td> </tr> <tr> <td>Emily/Suba</td> <td>9:10am</td> <td>(PM/FT children) 3:00</td> </tr> <tr> <td>Matu</td> <td>9:20am</td> <td>(PM/FT children) 3:10</td> </tr> <tr> <td>Claire</td> <td>9:30am</td> <td>(PM/FT children) 3:20</td> </tr> <tr> <td>2 year olds</td> <td>12:30 pm</td> <td>3:30 pm</td> </tr> </tbody> </table> <p>All AM children in the main nursery to be collected from the gate at 11:45am.</p> <p>We must be considerate of parents/carers having additional children to drop off/collect from school. We can be flexible for small number of parents who need us to amend times for their child but these need to be discussed in the staff team and arranged and agreed beforehand.</p> <p>Reception area is to be kept isolated and only used for parents settling their child into the school. No children to access this space (children to enter and exit classrooms by fire exits into the playground).</p>	Key group	Drop off time	Collection time	Nurture space	9 am	12 pm	Emily/Suba	9:10am	(PM/FT children) 3:00	Matu	9:20am	(PM/FT children) 3:10	Claire	9:30am	(PM/FT children) 3:20	2 year olds	12:30 pm	3:30 pm	1	1	1	Low
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Hygiene routines	Infection spreading from contact amongst children and staff - washing hands	3	3	9	<p>Follow 'Denmark procedure' - Upon arrival in the morning, and reentering the building throughout the day Whenever one's hands are visibly dirty After using the toilet After coughing or sneezing into one's hands, or into a disposable tissue Before eating When going from one room to another, or between groups of children After physical contact with others.</p> <p>Follow current guidance - cough/sneeze into your elbow or a tissue and put straight into the bin.</p> <p>Signs at entrances re: not entering if any symptoms are present.</p>	2	2	4	Medium																		

	Not having access to cleaning products - ordering and replenishing	3	3	9	Soap, hand-sanitiser, disinfectant, aprons and latex gloves etc. Fabrizio to monitor and order as required.	1	1	1	Low
	Ensure correct hand washing procedure	3	3	9	Current Public Health notices displayed around school. All staff to read and monitor children washing hands. To actively teach new children this process, and refresh with returning children.	2	2	2	Low
	Risk of infection from environment - cleaning resource, play spaces, surfaces and toilets	3	3	9	Resources to be cleaned at the end of each session by staff, some weekly on a rota through the week. Children to be involved in the washing of resources. Resources to be minimised, but enough for the children to continue to learn. This will include increased cleaning of door handles/push plates, surfaces and toilets. Also see individual class structures for more detailed information. Cleaning company (ENGIE), premises officer and staff members to ensure deep clean at the end of every day. This will include: <ul style="list-style-type: none"> • Used resources (staff) • All tables/chairs (ENGIE) • All surfaces (Staff/ENGIE) • All floors (ENGIE) • All toilets (ENGIE) Need to plan for a cleaning regime in a realistic way, with all staff back to usual hours, and all children in. Surfaces cleaned using soapy water, and then disinfected.	2	2	2	Low
Symptomatic child procedures	Child with symptoms of COVID 19 - risk of infection to others	3	3	9	Prior to starting back at school, a letter will be sent to all parents and carers explaining strict rules around children's health. Parents must keep children off school and notify immediately if they present with COVID symptoms. All parents and carers to complete a new emergency contact form to ensure contact numbers are up to date, with adults that can get to school quickly. Symptoms that may lead to self isolation: <ul style="list-style-type: none"> • Temperature above 38.6 degrees • Persistent dry cough • Loss of/or change to smell/ taste Children may present with different symptoms, including: <ul style="list-style-type: none"> • Headache • Sore throat • Fatigue • Loss of appetite Telephone parent/carer immediately and calmly explain they will need to be collected. Letter prepared for parents on what to do next - 119 and test, child with symptoms to self isolate for 10 days, all other family in the household for 14 days. If negative test results they can return to school, and the household ceases to self isolate. If tests are positive, see below.	2	2	4	Medium

					<p>One designated member to staff to sit with the child until collection. Adults are provided with PPE equipment if they are unable to maintain 2m distance, and to minimise contact with child/adult. Quarantine area to be cleaned once the child leaves.</p> <p>All staff and parents to be informed that a child/adult has displayed symptoms.</p> <p>If a test comes back positive, we will seek advice from our PHE HPT as the next steps. We will inform ofsted/ DfE of any closures that we have been advised to take.</p>				
	Area to quarantine child/ adult with symptoms	3	3	9	<p>Staff room - isolated room with quick access to outdoors, if toilets are required they are then to be closed to other staff and children. Second space if needed - playground by buggy storage area outside.</p> <p>All staff are aware of the procedure to follow in case of a child/adult presenting with symptoms. Procedure displayed for all to see.</p>	2	2	4	Medium
	Space to self isolate symptomatic child/adult	3	3	9	<p>Move child/adult to quarantine space.</p> <p>Ensure quarantine area has -</p> <ul style="list-style-type: none"> • Additional PPE equipment - visor, apron, gloves, mask. To be worn only if 2m distance cannot be maintained. • Toys/resources for child while waiting • Food/drink • First aid supplies (trip first aid kit) 	2	2	4	Medium
	Positive COVID case	3	3	9	<p>No entry to isolation space for 72 hrs and then deep cleaned. STRICTLY NO ENTRY signs are put up around the area, doors locked where they can be.</p> <p>Rachel and Lambeth contacted.</p> <p>School to communicate with other parents directly as soon as a child/adult is self isolated. Letter for parents and staff ready, with clear instructions. Staff to be reminded to be calm and considerate and to aim to minimise anxiety.</p> <p>If a test comes back positive, we will seek advice from our PHE HPT as the next steps. We will inform ofsted/ DfE of any closures that we have been advised to take.</p>	2	2	4	Medium
Classroom layouts	Limiting social contact	3	3	9	<p>Each pod is defined and has individual access to outside space. Children and staff are actively encouraged to spend most of their time outside.</p> <p>Staff to be very mindful of moving between classrooms, and only to do so where unavoidable; to use the phone system/communication boards to</p>	2	2	4	Medium

					<p>communicate. Staff to thoroughly wash hands with warm water and soap if moving between class spaces (although this should be kept to an absolute minimum).</p> <p>We will have a small number of staff working in both spaces. This will have implications if we are to send all home if a symptomatic person is on site.</p> <p>If there are children absent, or other reasons allow, then staff are to be sent home to work off site. This will minimise the number of adults within the setting at any time.</p>				
	Spread of the virus	3	3	9	<p>Windows to be open at all times.</p> <p>Hand washing is part of our regular routine.</p> <p>Hand sanitiser providence for situations where there is no handwashing available.</p>	2	2	2	Low
	Resources - remove or limit soft toys/ furnishings and equipment with intricate parts This will significantly impact on learning opportunities.	3	3	9	<p>Resources not to be moved between pods, and if this is necessary they must be washed and disinfected. Limit resources in the home corner (food, dressing up, soft toys). All soft furnishings to be removed.</p> <p>Remove workbench initially. Will need to review how this is used if we decide to reinstate.</p> <p>Staff to carefully monitor water, dough and creative areas and review and assess potential risk of infection. No sand for at least the Autumn term.</p> <p>No lending library.</p>	2	2	4	Medium
	Risk of infection - increased cleaning of resources in pods	3	3	9	<p>Cleaning provision and schedule to be planned with each team. Share with all all staff and clearly displayed. Staff within the day and at the end of days to clean areas deeply, all resources to be washed as much as possible - probably on a weekly rota. Children to be involved in this cleaning process.</p>	1	2	2	Low
	Enough cleaning and protective resources for each pod	3	3	9	<p>Each class space to have their own supply of -</p> <ul style="list-style-type: none"> • Gloves and aprons • Changing book • Accident book • First aid kit • Spare clothes • Disinfectant spray and cloths/ paper towel • Access to drinking water. • Hand sanitizer <p>All resources to be checked and replenished by the premises officer at the end of each day (when children and staff have gone home).</p>	1	1	1	Low
Outdoor play	Resources - remove any high risk resources	3	3	9	<p>Remove -</p> <ul style="list-style-type: none"> • dressing up clothes • Soft furnishings/ fabric surfaces • Any items that are particularly difficult to clean • Cottage locked, used for storage- to be reviewed if needed. 	2	2	4	Medium
Fire safety	If the fire alarm goes off.	3	3	9	<p>Amend fire safety notice and spaces to have separate evacuation points.</p> <p>All children and staff to meet outside flats opposite the school entrance.</p>	2	1	2	Low
Children with	Children at increased	3	3	9	<p>Children in the clinically extremely vulnerable category are encouraged to</p>	2	2	4	Medium

care plans and medical conditions	risk of infection to COVID-19				stay at home. All care plans and medication to be organised and located in the child's classroom for easy access.				
Children with SEND	Support for children with high levels of need.	2	3	6	Support will be given to each child to try and meet their needs. Parents reminded that the typical support and interventions in place may be amended to ensure all children remain safe.	2	2	4	Medium
First aid	Informing parents of accidents - children having accidents in school.	3	3	9	Remove children from the area and one staff member and child to await ambulance arrival, if needed. All other children to move to the furthest space (inside classroom). Follow usual procedure to record and report accidents to parents. Completing accident book with parents before they collect their child.	1	1	1	Low
	First aid needed elsewhere in school, outside of pods. Risk of contamination if other staff are entering pods.	2	3	6	First aid bag to be kept at reception for use for staff not in pods. This means they do not have to enter pods to access first aid kit.	1	1	1	Low
Visitors to the school	Essential works to be carried out (if required)	3	2	6	Limit and postpone any non-essential works and visitors. Work to be completed after 3:30pm (where possible). Staff member (premises/ admin) to oversee any visitors on site and to ensure there is very limited access to classrooms.	1	1	1	Low
	Settling in new children	3	2	6	Ensure that children's start dates are well spread out. As there will be no census this is not such an issue. Need to ensure those parents that are working have the earlier start dates. Seating parents/carers outside when settling in children. Keeping the number of parents/carers in the nursery to a minimum.	1	1	1	Low
	Music therapy support sessions	3	2	6	The government has advised that additional adults may visit the school if it is to support children. We believe this to be true for our music therapists. Consultation with the Director of music therapy and with the therapists will be had to ensure a safe and smooth transition back into the school. Reference to BAMT Guidance for music therapists working alongside COVID-19 . We must ensure the following is completed to limit infection: <ul style="list-style-type: none"> • Instruments cleaned at the start and end of each session. No instruments to be used that require mouth contact. • Well ventilated space (all windows open) to be used, or outside space if possible. • Limit number of children within the groups - maximum 2 children. • No family groups currently running. • Regular discussion and review of sessions between LP and music therapists. • PPE to be made available if necessary (visors, gloves, aprons). 	1	1	1	Low
Breakfast and afterschool club	No breakfast or after school club until at least October half term.								

Risk assessment completed by:	Luke Page	Date:	24/08/2020 (last amended 14/09/20)
Signature:		Date:	
Signed by Headteacher:		Date:	
Signed by Chair of Governors:		Date:	
Signed by individual:		Date:	



RISK LEVEL ESTIMATOR			
SEVERITY OF HARM	SLIGHTLY HARMFUL	HARMFUL	EXTREMELY HARMFUL
LIKELIHOOD OF HARM	1	2	3
HIGHLY UNLIKELY OCCURRENCE 1	Low 1	Low 2	Medium 3
UNLIKELY OCCURRENCE 2	Low 2	Medium 4	High 6
LIKELY OCCURRENCE 3	Medium 3	High 6	High 9

RISK LEVEL		ACTION AND TIME SCALE
Low	1	No action is required and no documentary records need to be kept.
Low	2	No additional precautions are required. Consideration may be given to a more cost effective solution or improvement that imposes no additional cost burden. Monitoring is required to ensure that the controls are maintained.
Medium	3 & 4	Effort should be made to reduce the risk further, within a defined time period, but the costs of precautions should be carefully measured. Where the medium risk is associated with extremely harmful consequences further assessment may be necessary to establish precisely the likelihood of harm as a basis for deciding the need for improved precautions.
High	6	Work should not be started until risks have been reduced. Considerable resources may have to be allocated to reduce the risk. In the event that no action can be taken to reduce the risk the matter must be referred to a senior officer. The OHS Team should also be contacted for advice.

High

9

Work should not be started or continued until the risk has been reduced. If it is not possible to reduce the risk, even with unlimited resources, work has to remain prohibited and the matter referred to a senior officer. The OHS Team should also be contacted for advice.

NOTE: Low means that risk has been reduced to the lowest level that is reasonably practicable