



Covid-19 Risk Assessment- September 2020 Full Opening

The technical name of the virus that causes COVID-19 is severe acute respiratory syndrome coronavirus 2, abbreviated as **SARS-CoV-2**

Whilst the Covid-19 virus can cause serious illness, especially for vulnerable adults with underlying health conditions evidence suggests that for the majority (particularly children and young people) they will experience a mild to moderate illness.

Whilst this is a complex and changing situation, there is enough known about the epidemiology of Covid-19 to provide a risk based approach to support staff in their roles.

The assessment below has been developed based on the following principles:

- That we will act together to ensure the safety and reassurance of all staff, children & young people.
- PPE will be recommended according to evidence of **efficacy and assessment of clinical risk**.
- All efforts will be made to secure a reliable and adequate supply of suitable PPE.
- PPE does not negate the need for social distancing and hand and respiratory hygiene.
- Having entered a period of sustained, community transmission, all staff and pupils are approached as potentially carrying Covid-19.

The national guidance and response requires that we prepare for all pupils to return full time from the start of the autumn term 2020. The risk assessments already in place from Summer term 2020 have been adapted. Essential protective measures for reopening in September include:

- A requirement that people who are ill stay at home
- Robust hand and respiratory hygiene
- Enhanced cleaning arrangements
- Active engagement with NHS Test and Trace
- Formal consideration of how to reduce contacts and maximise distancing between those in school wherever possible and minimise potential for contamination so far as is reasonably practicable

Potential Hazard	Risk	Who might be harmed?	Minimum control measures to reduce risks to an acceptable level	The Radstone Specific Actions to minimise risk
Covid-19 transmission	Staff not having appropriate knowledge on the virus, transmission and risk leading to increased transmission of COVID-19	Employees visitors, agency staff & members of the public	<p>All staff to keep themselves updated and follow the latest Government and national Public Health England/NHS guidelines via https://www.gov.uk/coronavirus</p> <p>https://www.nhs.uk/conditions/coronavirus-covid-19/</p> <p>Anyone in a vulnerable group and returning to work from a period of shielding will have reasonable workplace adjustments made and contact with pupils/ staff will be risk assessed as appropriate.</p>	<p>All staff briefed with initial plans in July 2020 and fully briefed 1/9/2020</p> <p>Risk Assessments and School Guidance shared</p> <p>PPT/briefing notes distributed following training</p> <p>Continued signage up around the school.</p> <p>Revised checklists for operation in all areas.</p>
Covid-19 transmission	Contagious people coming into school leading to increased transmission of COVID-19	Employees, visitors, agency staff, members of the public & pupils	<p>All visitors will be guided to read the 'Coronavirus Visitor Agreement' when signing in and must leave their contact details for track and trace purposes. By signing in they will be confirming that they are not displaying COVID-19 symptoms and that they have not been in contact with someone who has tested positive.</p> <p>Parents advised to wear masks at drop off and collection times.</p>	<p>Parent advice - no parents on site unless essential and masks to be worn.</p> <p>Return to school letters emphasising no-one should return if unwell/ displaying symptoms</p> <p>Clear guidance sent out about isolation periods to staff and parents.</p>

				<p>Essential contractors on site only with prior agreement – site supervisor managed.</p> <p>No unsupervised visitors</p> <p>Signage at entrances - not to enter with symptoms.</p> <p>'Coronavirus Visitor Agreement to be signed by anyone coming into the school.</p> <p>Child/ member of staff falling ill - procedure to follow in Appendix 4 flowchart.</p>
Transmission of Covid-19 via arrival at school	Increased transmission of virus on arrival at the school premises	Employees, visitors, agency staff, members of the public & pupils.	<p>Staff and pupils will be encouraged to consider how they travel to school, and reduce any unnecessary travel on coaches, buses or public transport. Walking, cycling and individual use of cars to be encouraged.</p> <p>Hand washing before arrival to be encouraged and sanitizer provided on entry.</p>	<p>Signage on entry about not entering with symptoms.</p> <p>No parent parking on site other than disabled</p> <p>Hygiene Protocol/ handwashing protocol for all staff and pupils. Hand sanitiser at entrances.</p>

<p>Inadequate implementation of social distancing at school</p>	<p>People being unable to adhere to social distancing therefore increasing the transmission and spread of Covid-19</p> <p>Spreading infection due to excessive contact and mixing between pupils and staff in lessons</p>	<p>Employees, visitors, agency staff, members of the public & pupils</p>	<p>Pupils will return to full classes and operate as year group or key stage 'bubbles' with the following extra measures to minimise mixing of pupils and staff:</p> <ul style="list-style-type: none"> - No mixing between year group classrooms - Small groups for small group teaching/ interventions can mix from year groups only and will be taught in a different allocated area which is cleaned between different groups - Staff can work across different groups in order to deliver the timetable, but they will keep their distance as much as possible. Close face-to-face contact will be avoided and time spent within 1m will be minimised. <p>In EYFS, minimising the mixing of children is recognised as challenging. As far as is practically possible, children will move around the setting in consistent groups with timetabled allocation to different areas. Shared play stations will be cleaned between different group use and all children will wash hands between sessions.</p> <p>Maximise opportunities for Learning Outdoors (separate advice available). Outdoor sports prioritised and contact sports avoided.</p> <p>Lessons that involve singing, chanting, shouting or playing instruments will be limited to class groups, and will take place outside where possible. Pupils will be positioned side-to-side forward facing. Instruments won't be shared and will be sterilised afterwards. Singing or instrument playing won't take place in any larger groups such as choirs or assemblies.</p>	<p>Well-ventilated classrooms- windows/doors open as far as reasonably practicable.</p> <p>Following guidance from Public Health England, in colder weather (when heating systems are turned on) windows and classroom doors will be open for a minimum of 50 minutes at the end of the school day after pupils have left. This will allow cross ventilation.</p> <p>Outside learning can take place when appropriate in zoned/timetabled areas. This will be co-ordinated to avoid groups passing in corridors.</p> <p>Staggered entry/ exit times to the day</p> <p>Only essential movement around the site. Individual bubbles move outside to inside mainly. Toilet access only in corridors.</p> <p>Daily safety briefings for pupils to remind of</p>
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			<p>Supply teachers, peripatetic teachers and other temporary staff will be told to minimise contact and maintain as much distance as possible from other staff. The number of temporary staff entering the school premises will be kept to a minimum.</p> <p>Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual following school protective measures. These staff will be advised to be rigorous with hand washing and respiratory hygiene.</p> <p>Lunch times, break times, and movement around the site will be staggered to reduce gatherings and there will be no interaction across year groups.</p> <p>Everyone will be either taught or asked to follow social distancing guidelines in school.</p> <p>Work to be undertaken by staff in different areas where possible.</p> <p>Unnecessary sharing of offices will be avoided and ideally staff will avoid using computers that have been used by others in the previous 72 hours.</p> <p>Staff- When indoor seating in the same space is necessary, seating to be arranged at least 1m apart. Good ventilation required when sharing internal spaces.</p> <p>Separated toilets will be used where possible – Different groups to utilise different toilets where possible.</p> <p>Unnecessary staff gatherings will be avoided.</p>	<p>expectations/ health and safety/ hygiene reminders</p> <p>All staff using own computers.</p> <p>Restricted access to staff for the office - admin staff only.</p> <p>Perspex screen between front desk and visitors to site.</p> <p>Staff room rules. Be vigilant with numbers and distancing. Follow all handwashing protocols/ wipe surfaces after use</p> <p>Staff briefings are carried out following social distancing guidance - year group 'essential' meetings only at the end of the day</p>
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			Staff and visiting group leaders to be aware of key national guidance for school/education settings.	
Poor hand & respiratory hygiene	Poor hand & respiratory hygiene leading to increased transmission of covid-19	Employees, visitors, agency staff, members of the public & pupils	<p>Follow Hand Washing protocol at Appendix 1 below https://www.who.int/gpsc/clean_hands_protection/en/</p> <p>Soap and water, and regular hand washing for at least 20 seconds, is the best way of staying safe. Hand washing with soap employs mechanical action that loosens bacteria and viruses from the skin, rinsing them into the drain. Drying hands afterwards makes the skin less hospitable to the virus. Hand sanitiser can be effective if soap is not available, or the situation makes using soap less feasible (for example, when outside), but using hand sanitiser provides none of the virus-destroying friction that rubbing your hands together and rinsing with water provides.</p> <p>Staff, visitors and pupils should be reminded to wash their hands for 20 seconds more frequently than normal, including on arrival at the setting, before and after eating, and after sneezing or coughing.</p> <p>Staff should supervise young children to ensure they wash their hands for 20 seconds with soap and water (or hand</p>	<p>Increased signage in all toilet areas. Toilets allocated to year group bubbles. Each bubble to have individual toilets, which will not be used by any other groups.</p> <p>Children taught about hand washing technique and reminded daily.</p> <p>'Hygiene for everyone' protocol – all children are encouraged to hand wash before school and they will use hand gel on entry. Hand gel will be used upon changing rooms (including going to and coming back from the toilet). Children will wash their hands before lunch and after using the toilet. Children will hand gel before going home.</p>

			<p>sanitiser if soap is not available or feasible in the particular situation)</p> <p>Coughs and sneezes to be caught in tissues. Bins for tissues should be emptied throughout the day.</p> <p>Some children and young people with special educational needs, disabilities and specific health risks may require additional support in following public health advice, or may find frequent hand washing distressing. Staff should know where this is likely to be the case, and how they can best support individual children and young people.</p>	<p>Youngest children to be supervised by allocated bubble staff when handwashing.</p> <p>Tissues/ wipes in every classroom. 'Catch it, Kill it, Bin it' visual posters around the school- children to be taught about this and understand its meaning.</p> <p>Bins emptied at lunchtime (when required) and end of day</p> <p>1:1 Provision maps for SEN/ separate risk assessment</p> <p>Pupils unable to engage may be redirected to home learning if safety and hygiene standards cannot be followed.</p>
Surfaces contaminated with Covid-19	Increased transmission of covid-19 via surface – face contact	Employees, visitors, agency staff, members of the public & pupils	<p>https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings (July 20)</p> <p>Regular points of contact should be cleaned regularly unless it is already known (with certainty) that the building has not been in use for 48hrs. It should be assumed this is not the case unless there is knowledge to the contrary.</p>	Classroom 'Bubble' surfaces will be wiped down at least twice per day (including tables before and after eating) as well as when there is change of use by pupil.

		<p>As a minimum, frequently touched surfaces should be wiped down twice a day.</p> <p>All areas of the school should be 'clutter free' and all surfaces kept clear for easy cleaning.</p> <p>Soft furnishings in classrooms e.g. cushions, rugs to be removed and 'carpet time' minimised for whole groups.</p> <p>Items that need laundering e.g. cloths, towels will be washed regularly in accordance with the manufacturer's instructions, on the warmest water setting. These items will not be shared between groups of children between washes.</p> <p>Any resources shared between groups, such as sports, art and science equipment, will be either:</p> <ul style="list-style-type: none"> -Cleaned frequently and meticulously, and always between groups using them; or -Rotated so they can be unused and out of reach for 48 hours (72hrs for plastic) between use by different groups <p>The same rules will be followed for books and other shared resources that pupils or staff take home. However, unnecessary sharing will be avoided, especially where this does not contribute to pupil education and development.</p> <p>In EYFS, general use of sand and playdough will be avoided unless prepared for individual use and supervised e.g. named playdough pots/ sand trays. Water trays will be changed between each group. Basic equipment/ play stations will be wiped down between groups. Small world play equipment will be cleaned daily.</p>	<p>Where doors are used by multiple year groups, they are propped open.</p> <p>Key shared areas cleaned at lunchtime and at the end of the day- all toilets and sinks.</p> <p>Reading book sets (EYFS/KS1) allocated to a bubble for use. All books wiped down and quarantined for 48hrs before moving to another bubble.</p> <p>Reading books (KS2) kept on tables. Wiped down and quarantined for 48 hrs before shared.</p> <p>Allocated playtime equipment to each year group bubble cleaned after use.</p> <p>School hall to be used at lunchtimes by EYFS. Any indoor PE lessons by whole classes only and cleaned between use (last resort).</p>
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			<p>Any shared rooms, such as halls and dining areas, will be cleaned between different groups using them.</p> <p>School library will be left unused for 48 hours if used by a class group.</p> <p>If a person with coronavirus symptoms comes into school, a deep clean will take place in the areas that the person has been in, following decontamination guidance.</p>	<p>Extra cleaning to take place after an external letting as per lettings policy.</p>
<p>Intimate care and minimising the risk of Covid-19</p>	<p>Intimate care procedures leading to increased transmission of covid-19</p>	<p>Employees, visitors, agency staff, members of the public & pupils</p>	<p>The virus that causes COVID-19 is mainly transmitted through droplets generated when an infected person coughs, sneezes or speaks. These droplets are too heavy to hang in the air. They quickly fall on floors or surfaces. The advice for schools, colleges and childcare settings is to follow steps on social distancing, hand washing and other hygiene measures, and cleaning of surfaces.</p> <p>If you are not providing intimate care to someone, PPE is not needed.</p> <p>Some children, and young people with special educational needs, may be unable to follow social distancing guidelines, or require personal care support. In these circumstances, staff need to increase their level of self-protection, such as minimising close contact (where appropriate), cleaning</p>	<p>Intimate care as per school policy- first aid/ administering medicine. All staff to wear usual apron/ gloves.</p> <p>PPE available for use in First Aid room. Basic First Aid kits in every bubble/ PPE equipment.</p>

frequently touched surfaces, and carrying out more frequent handwashing. School staff should continue to use the PPE that they have always used (such as an apron and gloves) when undertaking more intimate care with pupils.

Suggested protocol for the use of PPE (Based upon Public Health England Guidelines).

	Category	PPE Requirements	Educational Setting
1	Staff / Pupil interaction where distance of 1m can be maintained throughout	<p>Close adherence to hand (i) and respiratory hygiene protocols (ii).</p> <p>No additional PPE required beyond what would usually be worn for any given task</p>	The majority of school and childcare settings will fall into this category. For example Class Teacher and Classroom assistants working within a classroom environment where social distancing can be adhered to.

It is acknowledged that it may not always be possible to maintain 1m distancing in the normal workings between adults and pupils in school.

PPE should be worn in circumstances that require close attention (e.g. medical/intimate care).

Judgement should be used about the need for PPE in other circumstances.

All staff briefed on PPE usage in situations that require more intimate care/close attention.

PPE equipment available in each class and the medical room.

			2	<p>Staff / pupil interaction where momentary (iii) physical contact is required or cannot maintain 1m distance.</p>	<p>Close adherence to hand and respiratory hygiene protocols.</p> <p>Surgical facemask to be worn by member of staff. Sessional (iv) use is adequate in these circumstances.</p>	<p>In some childcare and school settings where intimate care is required it may be necessary to wear a surgical facemask when undertaking certain tasks (e.g. administration of medication where it cannot be self medicated, or When administering first aid, self-administration is not possible e.g. child places their own plaster on a cut / laceration</p>	
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			3	Prolonged/intimate (v) physical contact is required between member of staff and Pupil.	<p>Close adherence to hand and respiratory hygiene protocols.</p> <p>PPE required - Disposable gloves, disposable apron, sessional surgical facemask, (include eye protection if client is coughing or sneezing). Donning and doffing according to standard protocols (vi) and disposing of clinical waste appropriately (vii).</p>	Anyone who is symptomatic should not be in a childcare or school setting. However if required to undertake intimate care with a child or young person then category 3 PPE will apply e.g. If a child requires intimate care when administering first aid as a result of serious injury. If that child were coughing or spitting, this should include eye protection.	
			4	Any scenario in the household of a 'shielded' (viii) person. Close adherence to hand and respiratory hygiene protocols	PPE required - Disposable gloves and plastic apron in addition to single use (ix) surgical facemask.	Not applicable	
			5	Specialist scenarios e.g. Aerosol generating procedures, hospital inpatients, home	Specialist PPE requirements	Not applicable	

			<table border="1"> <tr> <td data-bbox="871 95 936 279"></td> <td data-bbox="936 95 1207 279">births, phlebotomy in non-compliant patients etc.</td> <td data-bbox="1207 95 1473 279"></td> <td data-bbox="1473 95 1682 279"></td> </tr> </table>		births, phlebotomy in non-compliant patients etc.			<p>Controlled movement in the corridors- one bubble at a time.</p>
	births, phlebotomy in non-compliant patients etc.							
<p>NB: This summary relates to PHE's COVID-19: infection prevention and control, last updated 6th April</p> <p>Review above table alongside appendix 2</p> <p>The majority of staff will not require PPE beyond what they would normally need for their work. PPE needs to be worn in a very small number of cases, including:</p> <ul style="list-style-type: none"> - Where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at school, and only then if a distance of 2m 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 <p>In circumstances where staff feel PPE is appropriate following the principles above careful judgement should be used to consider likely risk and also any impact of behaviour the child/young person may demonstrate as a result of PPE being worn. The wearing of PPE unless carefully removed in itself can add increased risk therefore it is expected that PPE in educational settings will only be required for momentary use and not for a long period of time.</p> <p>Based on current evidence and the current protective measures and controls in place, face coverings will not be worn in school. To mitigate risk in busier areas, such as</p>								

			corridors and cloakrooms, extra protective measures are in place to reduce movement and prevent mixing of year group bubbles. Corridors have been also been cleared to minimum furniture to allow ease of movement.	
Injury during travel and whilst onsite.	Increased pressure on an already stretched NHS	Employees, visitors & agency staff	External Visits and travel to be minimised. Higher risk tasks to be avoided where possible e.g. work at height.	Minimum external visits. Usual workplace expectations of safe working/ minimising risk
When essential travel in a vehicle is required	Sharing a vehicle where social distancing is not possible leading to increased transmission of covid-19	Drivers, pupils and accompanying staff	Staff should only share a vehicle with a pupil as an absolute last resort. (E.g. Emergency response). If you have to share the vehicle with a pupil – remember to wipe down the car after the visit has taken place e/g steering wheel, handbrake, door handles etc with an antibacterial wipe (dispose of the wipes by double bagging) and open windows.	All parents advised to use cars if essential No public transportation. Mini bus not in use.
Increased lone working	Becoming injured when help is not at hand	Employees and contractors	Many social distancing measures result in an increase in lone working, something that is usually minimised. If you are lone working it is important to follow lone working guidance and ensure a buddy system is implemented and you are in regular contact re your whereabouts.	Lone working must have permission of HT other than usual duties of site team.
Managing risk of an individual	Proximity to a person displaying covid-19	Employees, pupils, agency staff,	If a symptomatic person comes into school, they will be sent home immediately or isolated until they can be picked up.	Allocated room for isolation- FIRST AID room clearly

displaying symptoms	symptoms leading to increased transmission of covid-19	members of the public	<p>If someone becomes unwell and starts to display symptoms and starts to display with a new, continuous cough or a high temperature or a loss of taste/sense of smell in an education setting they must be sent home and advised to follow the staying at home guidance.</p> <p>If an affected person is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door. If they are a child, depending on the age of the child appropriate adult supervision may be required.</p> <ul style="list-style-type: none"> - If a distance of 2m can't be maintained, supervising staff will wear a fluid-resistant surgical mask -If contact is necessary, supervising staff will also wear disposable gloves and a disposable apron -If there's a risk of splashing to the eyes, such as from coughing, spitting or vomiting, supervising staff will also wear eye protection <p>Supervising staff will wash their hands thoroughly for 20 seconds after the pupil has been picked up.</p> <p>Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area, which is at least 2 metres away from other people.</p> <p>If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.</p>	<p>marked with signage 'ISOLATION ROOM'.</p> <p>Anyone in the building displaying COVID-19 symptoms to be isolated immediately there.</p> <p>If it is a pupil- one member of staff only with them. Member of staff to wear PPE- mask/ apron/ gloves. All stored in the First Aid room.</p> <p>The toilet area used by the ill person showing symptoms to be cleaned immediately and the working area they had been in.</p> <p>Ill person showing symptoms to be offsite as soon as possible and to seek a test immediately. Everyone in the bubble of the person showing symptoms will be notified to ensure extra vigilance.</p> <p>Return to school/ work if the test is negative and when they are well. If the test is</p>
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			<p>If there are home testing kits available in school, these will be given to parents/carers collecting symptomatic children, or to staff who have developed symptoms, if providing one will increase the likelihood of them getting tested. Only in exceptional circumstances (agreed by the HT) will staff take symptomatic children home.</p> <p>All areas that the symptomatic person has been in will be deep cleaned immediately and all PPE disposed of properly, following decontamination guidance.</p> <p>If the school becomes aware that a pupil or staff member has tested positive for coronavirus, the school will contact the local health protection team for advice and action. The team will carry out a rapid risk assessment to decide who has been in close contact with the person, and these people will be asked to self-isolate.</p> <p>https://www.gov.uk/guidance/contacts-phe-health-protection-teams</p> <p>To aid this process, records will be kept in school of the pupils and staff in each group and any close contact that takes place between children and staff in different groups. All parents will be made aware of the process following a confirmed case/ positive test.</p> <p>Close contact means:</p> <ul style="list-style-type: none"> - Direct close contacts- face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face 	<p>positive we will seek advice and follow guidance provided by the Health Protection Team. We will then notify groups who are required to self-isolate. The school community will be notified of the incident (without names) and the bubble it occurred in.</p>
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			<p>conversation, or unprotected physical contact (skin-to-skin)</p> <ul style="list-style-type: none"> - Proximity contacts- extended close contact (within 1-2m for more than 15 mins) with an infected individual - Travelling in a small vehicle, like a car, with an infected person 	
Deliveries and Maintenance on school sites	Increased number of people onsite leading to increased transmission of covid-19		<p>Only essential repairs and maintenance work should be carried out</p> <p>Deliveries that need to be handled immediately should be sanitized with wipes before taking them inside the premises</p> <p>Keep deliveries to a minimum with important items only.</p>	<p>Delivery box zone outside of the school office for all deliveries to be dropped in.</p> <p>Delivery packages wiped before opening.</p> <p>Necessary contractors on site only- briefed about school protocols and supervised throughout visit.</p>
Fire Safety	Risk of confusion caused by new locations/ routes/ assembly points due to Covid-19	All pupils and staff	Fire safety policy has been reviewed and amended to take account of any site or procedural changes necessitated by Covid-19 arrangements.	<p>Fire procedures updated by DM</p> <p>Fire practice for whole school within first fortnight under Covid-19 conditions respecting social distancing.</p>

				Transition groups to be informed of fire exits/ routes on the first morning in. Covid grouping register available.
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Appendix 1: Clean hands protect against infection (WHO protocol)

Protect yourself

- Clean your hands regularly.
- Wash your hands with soap and water, and dry them thoroughly.
- Use alcohol-based hand sanitiser if you don't have immediate access to soap and water.

How do I wash my hands properly? Washing your hands properly takes about as long as singing "Happy Birthday" twice, using the images on right:



Appendix 2

i.	Handwashing Protocol	Attached at appendix 1 above https://www.who.int/gpsc/clean_hands_protection/en/
ii	Respiratory hygiene protocol	This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately. https://www.who.int/emergencies/diseases/novel-coronavirus2019/advice-for-public
iii	Momentary contact	Relates to ad hoc interventions that may create proximity to bodily fluid – e.g. a driver putting a seatbelt onto a client.
iv	Sessional use	Surgical facemask can be used multiple times and need not be disposed of until wet, damaged or uncomfortable. https://www.gov.uk/government/publications/wuhan-novel-coronavirusinfection-prevention-and-control/covid-19-personal-protective-equipmentppe#section-6
v	Intimate care	Is defined as a role which is personally supporting the client to bathe, wash, feed etc. where there may be close proximity to bodily fluids.
vi	Donning and doffing	Refers to the correct method by which PPE should be put on and taken off. https://www.gov.uk/government/publications/covid-19-personalprotective-equipment-use-for-non-aerosol-generating-procedures https://www.youtube.com/watch?v=-GncQ_ed-9w
vii	Disposal of PPE	PPE should be bagged and disposed of in a lidded bin followed by close adherence to hand washing protocol.
viii	Shielded person	Definition at appendix 3.
ix	Single use	Refers to disposal of PPE after each client interaction.
x	PHE Covid-19 IPC	https://www.gov.uk/government/publications/wuhan-novel-coronavirusinfection-prevention-and-control?utm_source=7c916e5e-b965-44d0-a304cf38d248abba&utm_medium=email&utm_campaign=govuknotifications&utm_content=immediate

Appendix 3

People falling into this **extremely vulnerable group** include:

1. Solid organ transplant recipients.
2. People with specific cancers:
 - people with cancer who are undergoing active chemotherapy
 - people with lung cancer who are undergoing radical radiotherapy
 - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - people having immunotherapy or other continuing antibody treatments for cancer □ people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.

NB: Patients should have received notification directly from the government and or their GP practice about whether they fall into this group and how to reduce their risk.

Appendix 4



THLT guidance for schools in the management of COVID-19

