

Saint Geo	rge Catholic College Covi	d-19 Risk Assessment
Head Teacher: Mr J Habberley		Assessment Ref: Schools Covid-19 RA V3 for September 2021
Site/Location of Task: Saint George Catholic College		
General guidance/recommendations for the new academ	nic year during Covid-19 Pandemic	
Full government guidance can be found via the links bel <u>Schools Coronavirus Operation Guidance</u>	-	•
Actions-For Schools During the Coronavirus Outbreak -	Guidance for Full Opening of Schoo	<u>ls</u>
(standard Risk As	sessments should continue to be re	ferred to for all non-Covid-19 risks)
-		
List those who may be at risk / harmed: Employees, visite	ors, contractors, member of public	
Assessor's Name	Assessor's Signature	Assessment Date
James Habberley	Tabbonley	1 <sup>st</sup> September 2021
practices they have already developed), to consider the addi	tional risks and control measures to en	sit and update their risk assessments (building on the learning to date and the able a return to full capacity. Settings should also review and update their entional risk profile considering the implications of coronavirus (COVID-19).
Schools should ensure that they implement sensible and pro reasonably practicable level.	portionate control measures which follo	ow the health and safety hierarchy of controls to reduce the risk to the lowest
School employers should have active arrangements in place	to monitor that the controls are:	
<ul> <li>effective</li> <li>working as planned</li> <li>updated appropriately considering any issues identified</li> </ul>	ied and changes in public health advice	9
For the governments full guidance on reopening schools plea	ase refer to <u>Schools Coronavirus Oper</u>	ation Guidance



## Coronavirus (COVID-19) Specific Risk Assessment

Everyone needs to assess and manage the risks from coronavirus (COVID-19). This means school employers and leaders are required by law to think about the risks the staff and pupils face and do everything reasonably practicable to minimise them, recognising they cannot completely eliminate the risk of coronavirus (COVID-19). School employers must therefore make sure that a risk assessment has been undertaken to identify the measures needed to reduce the risks from coronavirus (COVID-19) so far as is reasonably practicable and make the school COVID-secure. General information on how to make a workplace COVID-secure, including how to approach a coronavirus (COVID-19) risk assessment, is provided by the <u>HSE guidance on working safely</u>.

Schools should undertake a coronavirus (COVID-19) risk assessment. This risk assessment example may be used as guidance towards this but it must be carefully reviewed by schools to make it specific to their site. A risk assessment is not about creating huge amounts of paperwork, but rather about identifying sensible measures to control the risks in the workplace, and the role of others in supporting that. The risk assessment will help school leaders and employers decide whether they have done everything they need to. Employers have a legal duty to consult their employees on health and safety in good time. It also makes good sense to involve pupils (where applicable) and parents in discussions around health and safety decisions to help them understand the reasons for the measures being put in place. Employers can do this by listening and talking to them about how the school will manage risks from coronavirus (COVID-19) and make the school COVID-secure. The people who do the work are often the best people to understand the risks in the workplace and will have a view on how to work safely. Involving them in making decisions shows that the school takes their health and safety seriously.

### Sharing your risk assessment

Schools should share the results of their risk assessment with their workforce. If possible, they should consider publishing it on their website to provide transparency of approach to parents, carers and pupils (HSE would expect all employers with over 50 staff to do so).

### Monitoring and review of risk controls

It is important that employers know how effective their risk controls are. They should monitor and review the preventive and protective measures regularly, to ensure the measures are working, and taking action to address any shortfalls.

## The government has provided a system of controls: protective measures to be followed

Having assessed their risk, schools must work through the below system of controls, adopting measures in a way that addresses the risk identified in their assessment, works for their school, and allows them to deliver a broad and balanced curriculum for their pupils, including full educational and care support for those pupils who have SEND. If schools follow the guidance set out here they will effectively reduce risks in their school and create an inherently safer environment.

## System of controls

This is the set of actions schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the sections below.

## Prevention:

1) minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school

- 2) clean hands thoroughly more often than usual
- 3) ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach
- 4) introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach
- 5) minimise contact between individuals and maintain social distancing wherever possible
- 6) where necessary, wear appropriate personal protective equipment (PPE)
- Numbers 1 to 4 must be in place in all schools, all the time.
- Number 5 must be properly considered and schools must put in place measures that suit their particular circumstances.

Number 6 applies in specific circumstances.



Response to any infection:
7) engage with the NHS Test and Trace process
8) manage confirmed cases of coronavirus (COVID-19) amongst the school community
9) contain any outbreak by following local health protection team advice

Numbers 7 to 9 must be followed in every case where they are relevant.



No.	Hazard (H) Description Briefly describe how the hazard could be realised, i.e. describe the potential accident. Include a description of the reasonably foreseeable injury	H 1-5	Control Measures - Likelihood (L) Factors Detail the following - Existing controls (Do they work?); Consider Safe Working Procedures (SWP), frequency; environmental factors; previous hazardous events; accident statistics etc.	L 1-6	Risk = HxL	Further action / control req'd? Y/N
01A	<u>Staff who are Clinically</u> Extremely Vulnerable (CEV)	3	For staff clinically extremely vulnerable (CEV) people are advised, as a minimum, to follow the same guidance as everyone else. It is important that everyone adheres to this guidance, but CEV people may wish to think particularly carefully about the additional precautions they can continue to take. Further information can be found in the guidance on protecting people who are CEV from COVID-19. Social distancing measures have now ended in the workplace and it is no longer necessary for the government to instruct people to work from home. Employers should be able to explain the measures they have in place to keep CEV staff safe at work. The Health and Safety Executive (HSE) has published guidance on protecting vulnerable workers, including advice for employers and employees on how to talk about reducing risks in the workplace.	2	6 Low	Ν
01B	<u>Children who are Clinically</u> Extremely Vulnerable (CEV)	3	All clinically extremely vulnerable (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 clinician or other specialist not to attend. Further information is available in the guidance on supporting pupils at school with medical conditions	2	6 Low	Ν
02	<u>Staff who are Clinically</u> <u>Vulnerable (CV)</u> ovid-19 – Risk Assessment for Full Red	3	Staff who are clinically vulnerable CV staff can continue to attend school. While in school they must follow the <b>system of controls</b> to minimise the risks of transmission. g of Schools – March 2021 Page 4	2	6 Low	Further information on the System of Controls can be found on page 8 of the <u>Schools</u> <u>Coronavirus Operational</u> <u>Guidance</u> Version 3 – February 2021



03	<u>Pregnancy</u>	3	Staff who live with those who are CV can attend the workplace but should ensure they maintain good prevention practice in the workplace and at home. Please see SCC guidance Risk Reduction Framework (Risk Assessment for Vulnerable Employees) on <u>Coronavirus Microsite</u> Pregnancy. We follow the <u>guidance for pregnant employees</u> because	2	6	Ν
			pregnant women are considered CV. In some cases pregnant women may also have other health conditions that mean they are considered CEV, where the advice for clinically extremely vulnerable staff will apply. <u>COVID-19 vaccination: a guide for women of childbearing age, pregnant</u> <u>or breastfeeding</u> contains vaccination advice.		Low	
			Our individual workplace risk assessment will consider any risks to female employees of childbearing age and, in particular, risks to new and expectant mothers. If an employee is pregnant, breastfeeding, or has given birth within the last 6 months, they will have had a workplace risk assessment to see if any new risks have arisen. Any risks identified at that point, or later during the pregnancy, in the first 6 months after birth, or while the employee is still breastfeeding, have been included and managed as part of the general workplace risk assessment. As part of the risk assessment, we are facilitating home working to mitigate risks.			
			We are aware that pregnant women from 28 weeks' gestation, or with underlying health conditions at any point of gestation, may be at greater risk of severe illness if they catch coronavirus (COVID-19). This is also the case for pregnant women with underlying health conditions that place them at greater risk of severe illness if they catch coronavirus (COVID-19). <u>Read more guidance and advice on coronavirus (COVID-19) and</u> pregnancy from the Royal College of Gynecologists.			
04	Staff who may otherwise be at increased risk from Coronavirus (Covid-19)	3	Current evidence shows that a range of factors mean that some people may be at comparatively increased risk from coronavirus (COVID-19). Those at particularly high risk from a range of underlying health conditions should now have been included in the CEV group and will be receiving a letter to confirm this.	2	6 Low	
			For staff clinically extremely vulnerable (CEV) people are advised, as a			Further information on the



			minimum, to follow the same guidance as everyone else. It is important that everyone adheres to this guidance, but CEV people may wish to think particularly carefully about the additional precautions they can continue to take. Further information can be found in the guidance on protecting people who are CEV from COVID-19.			System of Controls can be found on page 8 of the <u>Schools</u> <u>Coronavirus Operational</u> <u>Guidance</u>
05	Covid-19 (Coronavirus) Infection control if concerns regarding exposure to the virus	3	If you have <u>symptoms</u> of COVID-19 however mild, get a test as soon as possible. Stay at home until you get the result.	2	Low 6	For further government guidance on Covid-19 visit; <u>Coronavirus (COVID-19):</u> <u>guidance - GOV.UK</u> (www.gov.uk) <u>https://www.gov.uk/guidance/wor</u> <u>king-safely-during-coronavirus- covid-19</u> For further SCC guidance visit; <u>Young Southampton Schools</u> <u>Guidance</u> <u>Young Southampton</u> <u>Coronavirus Microsite</u>
06	Infection Protection and Control General risk of exposure to disease through contact with others and/or touching contaminated surfaces	3	<ul> <li>Preventing the spread of Covid-19 (Coronavirus) involves dealing with direct transmission (i.e. close contact with those sneezing and coughing) and indirect transmission through touching contaminated surfaces.</li> <li>Wash hands thoroughly using hot water and soap frequently during the day, especially on arrival at sites, workplaces and on re-entering after lunch or other absences. Avoid touching the face.</li> <li>Observe government guidelines regarding social distancing where possible.</li> <li>Follow the school rules and routines. All pupils and teaching staff to follow the start and end of lesson routines.</li> </ul>	2	6 Low	For further information refer to <u>Schools Coronavirus Operational</u> <u>Guidance</u>



07	Hygiene General risk of exposure to disease through contact with others and/or touching contaminated surfaces	3	<ul> <li>Sufficient handwashing facilities are available. Where a sink is not nearby, hand sanitiser in classrooms and other learning environments are available.</li> <li>Clean surfaces that children and young people are touching, such as toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters, more regularly than normal</li> <li>All adults and children: <ul> <li>frequently wash their hands with soap and water for 20 seconds and dry thoroughly. Review the guidance on hand cleaning</li> <li>clean their hands on arrival at the setting, before and after eating, and after sneezing or coughing</li> <li>are encouraged not to touch their mouth, eyes and nose</li> <li>use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it')</li> </ul> </li> <li>Help is available for children and young people who have trouble cleaning their hands independently</li> <li>Ensure that bins for tissues are emptied throughout the day</li> </ul>	2	6 Low	
08	General Office General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	DSE – ensure all workstations and equipment are thoroughly cleaned with antibacterial wipes. This includes the desk surface, keyboard, mouse and telephone handset and buttons, including the mouth and ear pieces. It should be noted that current government advice is that PPE is not considered necessary in schools in general, i.e. staff in general contact with children and young people, such as teaching or supervising play etc.	1	3 Low	Ν



09	Staff room and refreshment areas General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment (taps, kettles, fridges etc.)	3	Shared staff spaces are set up and used to help staff to distance from each other.	2	6 Low	
10	Minimizing Contact General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	The DFE recommends that it is no longer necessary to keep children in consistent groups ('bubbles'). This means that bubbles will not need to be used for any summer provision (for example, summer schools) or in schools from the autumn term. As well as enabling flexibility in curriculum delivery, this means that assemblies can resume, and you no longer need to make alternative arrangements to avoid mixing at lunch. The school has an outbreak management plan to cover the possibility that in some local areas it may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups. Any decision to recommend the reintroduction of 'bubbles' would not be taken lightly and would need to take account of the detrimental impact they can have on the delivery of education.	2	6 Low	Ν
11	Classrooms General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	Hand hygiene Frequent and thorough hand cleaning should now be regular practice. Students and staff have to ensure that pupils clean their hands regularly at the start and end of lessons. This can be done with soap and water or hand sanitiser. 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. Use of personal protective equipment (PPE) n of Schools – March 2021 Page 8	2	6 Low	Version 3 – February 2021



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PPE is allowed to be worn by the pupil or member of staff if they choose too. The guidance on the use of PPE in education, childcare and children's social care settings provides more information on the use of PPE for COVID-19.			
2. Maintain appropriate cleaning regimes, using standard products such as detergents			
An appropriate cleaning schedule is in place at the start and end of the school day. A full time cleaner is employed throughout the day to clean areas that receive high traffic and high use such as stair banisters doors etc. 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.			
Teachers are asked to keep occupied spaces well ventilated with windows and doors open.			
For poorly ventilated spaces Mechanical ventilation is used.			
If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.			
Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations.			
Opening external windows can provides natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so).			
The school will balance the need for increased ventilation while maintaining a comfortable temperature.			
The Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic and CIBSE COVID-19 advice provides more information.			
DfE is working with Public Health England, NHS Test and Trace, and the Scientific Advisory Group for Emergencies (SAGE) on a pilot project to measure CO2 levels in classrooms and exploring options to help improve ventilation in settings where needed.			



12	<u>Maintaining Social Groups</u> General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	The DFE now advises that assemblies and year groups masses, large gatherings can now take place. The main hall will be well ventilated and all pupils will face forward.	2	6 Low	N
13	Ventilation Increased risk of exposure to disease in enclosed spaces	3	<ul> <li>Keep occupied spaces well ventilated Good ventilation reduces the concentration of the virus in the air, which reduces the risk from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied and enclosed area.</li> <li>We ensure the school is well ventilated and a comfortable teaching environment is maintained.</li> <li>These is achieved by a variety of measures including: <ul> <li>mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply</li> <li>natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air</li> <li>natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)</li> </ul> </li> <li>The Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak and CIBSE coronavirus (COVID-19) advice provides more information.</li> <li>To balance the need for increased ventilation while maintaining a comfortable temperature, consider:     <ul> <li>opening high level windows in colder weather in preference to low level to reduce draughts</li> </ul> </li> </ul>	2	6 Low	



			<ul> <li>increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is unused)</li> <li>providing flexibility to allow additional, suitable indoor clothing – for more information see school uniform</li> <li>rearranging furniture where possible to avoid direct draughts</li> <li>Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.</li> </ul>			
14	General movement around schools. General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	<ul> <li>One-way circulation, remains in place in the main building and the science and technology block.</li> <li>DFE advises that students can return to our normal structure of the college day.</li> </ul>	2	6 Low	N
15	Sharing of Equipment and Resources. General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space and shared equipment	3	For individual and very frequently used equipment, such as pencils and pens, staff and pupils should have their own items. Classroom based resources, such as books and games, can be used following updated DFE guidance.	2	6 Low	N
16	Physical Activities in schools including Educational and School Sports (PE) General risk of exposure to disease through contact with others and/or touching contaminated surfaces.	3	<ul> <li>Pupils are kept in consistent groups, sports equipment thoroughly cleaned between each use by different individual groups.</li> <li>We hold PE lessons outdoors as much as possible, including those that involve activities related to team sports, for example practising specific techniques, within your own system of controls.</li> <li>For sport provision, outdoor sports should be prioritised where possible, and large indoor spaces used where it is not, maximising natural ventilation flows (through opening windows and doors or using air conditioning systems wherever possible), distancing between pupils, and paying scrupulous attention to cleaning and hygiene. This is particularly important in a sport setting because of the way in which people breathe during exercise. External facilities can also be used in line with government guidance for the use of, and travel to and from,</li> </ul>	2	6 Low	



			<ul> <li>those facilities.</li> <li>National governing bodies have developed guidance under the principles of the government's guidance on team sport and been approved by the government i.e. sports on the list available at grassroots sports guidance for safe provision including team sport. contact combat sport and organised sport events. Competition between different schools should not take place until wider grassroots sport for under 18s is permitted.</li> <li>Refer to: <ul> <li>guidance on grassroot sports for public and sport providers, safe provision and facilities, and guidance from Sport England</li> <li>advice from organisations such as the Association for Physical Education and the Youth Sport Trust</li> <li>guidance from Swim England on school swimming and water safety lessons available at returning to pools guidance documents</li> <li>using changing rooms safely</li> </ul> </li> <li>If working with external coaches, clubs and organisations for curricular and extra-curricular activities, you must be satisfied that it is safe to do.</li> <li>Activities such as active miles, making break times and lessons active and encouraging active travel can help pupils to be physically active while encouraging physical distancing.</li> </ul>			
17	Arrival and departure from school General risk of exposure to disease through contact with others and/or touching contaminated surfaces due to limited space	3	DFE updated guidance allows students to arrive and leave school at the same time. <u>Travelling to the setting</u> Pupils and staff may use public transport where necessary, but we encourage them to walk, cycle or scoot to and from school wherever it is possible and safe to do so. Where pupils and staff need to use public transport, they should follow the <u>safer travel guidance for passengers</u> . The <u>transport to schools and other places of education guidance</u> requires those involved in the provision of dedicated transport to schools to identify the risks. People aged 11 and over must wear a face covering when travelling on	3	9 Med	



			<ul> <li>public and school transport and sit in their year group bubble. In accordance with advice from PHE, they must also wear a face covering when travelling on dedicated transport to secondary school. People who are exempt do not need to wear a face covering.</li> <li><u>Other considerations</u></li> <li>Some pupils with SEND (whether with EHC plans or on SEN support) will need specific help and preparation for the changes to routine that these measures will involve. Staff should plan to meet these needs, for example using social stories.</li> <li>To make sure pupils with medical conditions are fully supported, work with: <ul> <li>local authorities</li> <li>health professionals</li> <li>regional schools' commissioners</li> <li>other services</li> </ul> </li> <li>Use individual healthcare plans to help pupils receive an education in line with their peers. In some cases, the pupil's medical needs will mean this is not possible, and educational support will require flexibility.</li> <li>Further information is available in the guidance on <u>supporting pupils at school with medical conditions</u>.</li> <li>Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual. They, as well as supply teachers, peripatetic teachers or other temporary staff, can move between settings. We ensure they minimise contact and maintain as much distance as possible from other staff. Such specialists will be aware of the PPE most appropriate for their role.</li> </ul>			
18	<u>Personal Protective Equipment</u> (PPE) in relation to Covd-19	3	Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary. Face coverings are not classified as PPE (personal protective equipment).	2	6 Low	
			PPE is used in a limited number of settings to protect wearers against hazards and risks, such as surgical masks or respirators used in medical and industrial settings. A face covering is a covering of any type which covers your nose and mouth. Most staff in schools will not require PPE beyond what they would			



		<ul> <li>normally need for their work. If a pupil already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used.</li> <li>Additional PPE for coronavirus (COVID-19) is only required in a very limited number of scenarios, for example, when: <ul> <li>a pupil becomes ill with coronavirus (COVID-19) symptoms, and only then if a 2 metre distance cannot be maintained</li> <li>performing aerosol generating procedures (AGPs)</li> </ul> </li> <li>When working with children and young people who cough, spit or vomit but do not have coronavirus (COVID-19) symptoms, only any PPE that would be routinely worn, should be worn.</li> <li>The guidance on safe working in education, childcare and children's social care provides more information about preventing and controlling infection. This includes: <ul> <li>when and how PPE should be used</li> <li>what type of PPE to use</li> <li>how to source it</li> </ul> </li> </ul>			
19	Asymptomatic Testing	<ul> <li>Rapid testing remains a vital part of our plan to suppress this virus.</li> <li>We follow the guidance set out for         <ul> <li><u>Secondary schools and colleges</u></li> </ul> </li> <li><u>Systems of Controls – Response to any infection</u> <ul> <li>Promote and engage with the NHS Test and Trace process Staff members, parents and carers will need to;</li> <li><u>book a test</u> if they or their child has symptoms - the main symptoms are:                <ul> <li>a high temperature</li> <li>a new continuous cough</li> <li>a loss or change to your sense of smell or taste</li> <li><u>self-isolate</u> immediately and not come to school if:                     <ul> <li>they develop symptoms</li> <li>they have been in close contact with someone who tests positive for coronavirus (COVID-19)</li> <li>anyone in their household or support or childcare bubble develops symptoms of coronavirus (COVID-19)</li></ul></li></ul></li></ul></li></ul>	1	1 Low	



			<ul> <li>they are required to do so having recently travelled from certain other countries</li> <li>they have been advised to isolate by NHS test and trace or the PHE local health protection team, which is a legal obligation</li> <li>provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or they are asked by NHS Test and Trace</li> </ul>			
20	Asymptomatic Testing Coronavirus (COVID-19) in Schools	1	<ul> <li>Rapid testing using Lateral Flow Devices (LFD)s will support the return to face-to face education by helping to identify people who are infectious but do not have any coronavirus (COVID-19) symptoms.</li> <li>For secondary school staff and pupils we are moving to a home testing model (for pupils, following the first 2 onsite tests).</li> <li>Pupils who do not engage with asymptomatic testing are not prevented from returning to school and will attend face to face education in line with our school timetable. They will be asked to strictly follow all preventative measures inside school and if they have or a member of their household has any signs or symptoms they should stay at home and get a test.</li> <li>The lateral flow devices used have received regulatory approval from the MHRA for self use.</li> <li>Home test kits will be available for all staff on return.</li> <li>Once pupils have been tested 2 times at school, they will be provided with home test kits for regular testing. Testing remains voluntary but strongly encouraged.</li> <li>Secondary school testing on-site through an Asymptomatic Testing Site (ATS)</li> <li>We offer pupils testing on-site for the first two weeks in September.</li> <li>Testing is voluntary. If consent is provided, pupils will be asked to self-swab at the on-site ATS and after 30 minutes they should be informed of their results.</li> <li>Individuals with a positive LFD test result will need to self-isolate in line with the guidance for households with possible coronavirus infection.</li> </ul>	1	1 Low	



			<ul> <li>Those with a negative LFD test result can continue to attend school unless they have individually been advised otherwise by NHS Test and Trace or Public Health professionals (for example as a close contact).</li> <li>They should continue to apply the measures in the system of controls to themselves and the wider school setting.</li> <li>We will retain a small on-site ATS on site so they can offer testing to pupils who are unable or unwilling to test themselves at home.</li> <li><u>Home testing</u></li> <li>Both pupils and staff in secondary schools will be supplied with LFD test kits to self-swab and test themselves twice a week at home.</li> <li>Staff and pupils must report their result to NHS Test and Trace as soon as the test is completed either online or by telephone as per the instructions in the home test kit.</li> <li>Staff and pupils should also share their result, whether void, positive or negative, with their school to help with contact tracing.</li> <li>Adolescents aged 12 to 17 should self-test and report with adult supervision. The adult may conduct the test if necessary. Children aged 11 attending a secondary school should be tested by an adult.</li> <li>Staff or pupils with a positive LFD test result will need to self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result if the test was done at home. Those with a negative LFD test result can continue to attend school and use protective measures.</li> </ul>			
21	<u>Managing Confirmed Cases of</u> <u>Coronavirus (COVID-19)</u> <u>Amongst the School Community</u>	3	You must take swift action when you become aware that someone who has attended has tested positive for coronavirus (COVID-19) having developed symptoms and taken a PCR test outside of school. If you would like support on the action you should take to respond to a positive case, you can contact the dedicated advice service introduced by Public Health England (PHE) and delivered by the NHS Business	2	6 Low	



	<ul> <li>Services Authority. This can be reached by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case. You will be put through to a team of advisers who will inform you of what action is needed based on the latest public health advice.</li> <li>The advice service (or PHE local health protection team if escalated) will work with you to guide you through the actions you need to take. Based on their advice, you must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate immediately and for the next 10 full days counting from the day after contact with the individual who tested positive.</li> <li>Close contact means: <ul> <li>anyone who lives in the same household as someone with coronavirus (COVID-19) symptoms or who has tested positive for coronavirus (COVID-19)</li> <li>anyone who has had any of the following types of contact with someone who has tested positive for coronavirus (COVID-19)</li> <li>anyone who has tested positive for coronavirus (COVID-19) with a PCR or LFD test:</li> <li>face-to-face conversation within 1 metre</li> <li>been within 1 metre for 1 minute or longer without face-to-face contact (either as a one-off contact, or added up together over one day)</li> <li>travelled in the same vehicle or a plane</li> </ul> </li> <li>The advice service (or PHE local health protection team if escalated) will provide advice on who must be sent home. To support them in doing so, we recommend you keep a record of pupils and staff in each group, and any close contact that takes places between pupils and staff in different groups.</li> </ul>		
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			<ul> <li>contact with them, offer pastoral support, and check they are able to access education support.</li> <li>A template letter will be provided to you, on the advice of the health protection team, to send to parents and staff if needed. You must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.</li> <li>Household members of those contacts who are sent home do not need to self-isolate themselves unless the pupil or staff member who is self-isolating subsequently develops symptoms, unless they have been told to self-isolate by NHS Test and Trace or their public health protection team, in which case they must self-isolate. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within the 10 days from the day after contact with the individual who tested positive, they should follow guidance for households with possible or confirmed coronavirus (COVID-19) infection. They should get a test, and: <ul> <li>if the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period. This is because they could still develop coronavirus (COVID-19) within the remaining days</li> <li>if the test result is positive, they should inform their school immediately, and should isolate from the day of onset of their symptoms and at least the following 10 full days. Their household should self-isolate starting from when the symptomatic person in their household first had symptoms and the next 10 full days, following guidance for households with possible or confirmed coronavirus (COVID-19) infection</li> </ul> </li> </ul>			
22	Reporting actual or suspected cases of coronavirus (COVID-19) through the education setting status form	1	School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is required to self-isolate or quarantine because of COVID-19 in accordance with relevant legislation or guidance published by PHE or the DHSC they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be	1	1 Low	Ν



			recorded as code I (illness). For pupils abroad who are unable to return, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply. Further guidance about the use of codes is provided in the school attendance guidance.			
23	Admitting children and staff back to the school	3	The pupil or staff member who tested positive for coronavirus (COVID- 19) can return to their normal routine and stop self-isolating after they have finished their isolation period and their symptoms have gone or if they continue to have only a residual cough or anosmia.	2	6 Low	
			This is because a cough or anosmia can last for several weeks once the infection has gone.			
			If they still have a high temperature after 10 days or are otherwise unwell, you should advise them to stay at home and seek medical advice.			
			You should not request evidence of negative test results or other medical evidence before admitting pupils or welcoming them back after a period of self-isolation.			
			In the vast majority of cases, parents and carers will be in agreement that a pupil with symptoms should not attend the school, given the potential risk to others. In the event that a parent or carer insists on a pupil attending your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect your pupils and staff from possible infection with coronavirus (COVID-19). Your decision would need to be carefully considered in the light of all the circumstances and current public health advice.			
24	Covid-19 (Coronavirus) related illness in setting Risk from children and/or staff who may develop symptoms whilst in the setting	3	If anyone becomes unwell with a new, continuous cough or a high temperature or sudden loss of taste/smell in an education or childcare setting, they must be sent home and advised to follow the <u>COVID-19</u> : guidance for households with possible coronavirus infection guidance.	3	9 Med	
			If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. 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. 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. In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care centre or a hospital. If a member of staff has helped someone who was unwell with a new, continuous cough or a high temperature, loss of taste/smell, they do not need to go home unless they develop symptoms themselves (and in which case, a test is available) or the child subsequently tests positive (see 'What happens if there is a confirmed case of coronavirus in a setting?' below). They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people. See the <u>COVID-19: cleaning of non-healthcare settings</u> guidance.			
25	Response to an infection Virus may be transmitted through large groups of people unless strict controls are in place	3	<ul> <li>Schools must ensure they understand the NHS Test and Trace process and how to contact their local <u>Public Health England health protection</u> team. Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to: <ul> <li><u>book a test</u> if they are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit</li> <li>provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace</li> <li><u>self-isolate</u> if they have been in close contact with someone who develops coronavirus (COVID-19)</li> </ul> </li> <li>Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS testing</li> </ul>	2	6 Low	



			and tracing for coronavirus website, or ordered by telephone via NHS 119 for those without access to the internet.			
26	First Aid Potential for reduced First Aid cover during pandemic if staff are ill or self-isolating	3	First Aid cover should be reviewed to ensure adequate provision is in place at all times with temporary arrangements put in place if appropriate. Special consideration should be given to children and young people with special medical needs and paediatric requirements.	2	6 Low	
			As per usual arrangements, where appropriate First Aiders, and other staff who may deal with minor injuries or illnesses, should ensure they wear PPE (including a face mask if considered appropriate) when providing first aid.			
			Covid-19: advice for first aiders			
			<ol> <li>Be aware of the risks to yourself and others         When approaching a casualty there is always a risk of cross         contamination – especially when you may have to get close to         the casualty to assess what is wrong or to check their breathing.         It is always important to be aware of the risks of how this cross         contamination has occurred. According to NHS 111 we do not         know exactly how coronavirus spreads from person to person         but similar viruses are spread in cough droplets.</li> </ol>			
			2. Keep yourself safe In line with government advice, make sure you wash your hands or use an alcohol gel, before and after treating a casualty also ensure that you don't cough or sneeze over a casualty when you are treating them.			
			The Resuscitation Council (UK) provides some useful advice of how to keep yourself safe when providing CPR. <u>You can read</u> their full advice on their website here.			
			<ul> <li>Don't lose sight of other cross contamination that could occur that isn't related to COVID-19.</li> <li>Wear face masks if possible if you are unable to maintain social distancing to treat a person</li> <li>Wear gloves or cover hands when dealing with open wounds</li> </ul>			



	<ul> <li>Cover cuts and grazes on your hands with waterproof</li> </ul>	
	<ul> <li>dressing</li> <li>Dispose of all waste safely</li> </ul>	
	<ul> <li>Do not touch a wound with your bare hand</li> </ul>	
	<ul> <li>Do not touch any part of a dressing that will come in</li> </ul>	
	contact with a wound.	
3.	Give early treatment	
	The vast majority of incidents do not involve you getting close to	
	a casualty where you would come into contact with cough	
	droplets. Sensible precautions will ensure you are able to treat a	
	casualty effectively.	
4.	Keep yourself informed and updated	
	As this is a new disease this is an ever changing situation and	
	the government and NHS are continually updating their advice.	
	Make sure that you regularly review the NHS 111 or Gov.uk website which has a specific section on Coronavirus.	
	<ul> <li>Click here to visit NHS 111</li> </ul>	
	Click here to visit Gov.uk	
	<ul> <li><u>Click here to visit Resuscitation Council</u></li> </ul>	
5.	Remember your own needs	
	These are challenging and uncertain times for all. The COVID-	
	19 outbreak has meant a lot of upheaval and worry for people. In	
	order to help others you will also need to look after your own	
	needs. Make sure you take time to talk about your fears and concerns with someone you trust and to take out time to look	
	after yourself.	
6.	If you think you may have been exposed to or contracted Covid-19	
	If you are symptomatic for Covid-19 (Coronavirus), i.e. are	
	showing signs of high fever, new and persistent cough and	
	breathing difficulties, sudden loss or taste/smell, you should	
	inform your line manager and arrange to self-isolate for 7 days	
	with immediate effect. You can book also a test to confirm	
	whether you have the virus or not by visiting <u>https://self-</u> referral.test-for-Covid-19 (Coronavirus).service.gov.uk/.	
	Members of your household who are symptomatic can also be	
	tested to confirm whether they have the virus. If all symptomatic	



			persons in your household test negative, you can return to work.			
27	Fire and Emergency Evacuation Procedures There may be the potential for increased risks from fire due to temporary arrangements in place in schools such as reduced staff numbers and staff and children and young people being located in different areas than usual.	5	<ul> <li>It should be assured a current Fire Risk Assessment (FRA) is in place and where possible remedial actions completed.</li> <li>The FRA and current Fire and Emergency Evacuation procedures should be reviewed in conjunction with other changes being implemented during the Covid-19 pandemic.</li> <li>Where appropriate Temporary Fire and Emergency Evacuation Plan should be implemented and all staff briefed accordingly.</li> <li>A fire drill should be carried out at the earliest opportunity to provide awareness and familiarity for staff, children and young people alike.</li> <li>Reviews of Temporary Fire and Emergency Evacuation Plans and fire drills should be repeated accordingly as other year groups return to school under the phased return process.</li> <li>Personal Emergency Evacuation Plans (PEEP) in place for staff and/or children and young people should be reviewed to ensure they remain effective under any temporary arrangements.</li> </ul>	2	10 Med	Schools who have subscribed to the Property Term Servicing Agreement can continue to receive guidance and support with regards to their FRA and remedial actions as usual.
28	Stress, fatigue, verbal abuse Increased risk of stress during Covid-19 pandemic leading to staff being adversely affected by factors such as continuing change and lack of job control, conflicting demands between home and work and increased risk of verbal abuse from parents who are frustrated or frightened during the crisis	3	<ul> <li>Staff can talk to line manager if they are feeling unwell or ill at ease about things at work and or conflicting demands between home and work or concerns regarding their personal safety during the Covid-19 pandemic.</li> <li>Where necessary further guidance and support can be found through HR with regards to conflicting demands.</li> <li>Normal policy applies for dealing with verbal abuse from parents or anyone else. However de-escalation techniques should be used where possible in recognition that some parents may feel threatened or frustrated by the temporary arrangements in place, conflicting information in media and fear for their children's and their safety.</li> </ul>	3	9 Med	Staff signposted to support services, EAP (Employee Assistance Programme) - https://healthassuredeap.co.uk/w p- content/plugins/healthassured/sl. php?lg=southamptoncc&lp=sout hamptoncc&lid=4093 Refer to Covid-19 (Coronavirus) wellbeing web pages - http://staffinfo.southampton.gov. uk/supporting-our- staff/coronavirus-covid19/our- wellbeing/ If you cannot access these pages please email the H&S team



						(health.and.safety@southampto n.gov.uk) with your query and they will endeavour to provide you with the information you require.
29	<u>SEND Guidance in relation to</u> <u>Covid-19</u>	3	Reference should be made to the GOV.UK guidance on risk assessments for settings managing children and young people with an education, health and care (EHC) plan during the Covid-19 (Coronavirus) outbreak. The government has published guidance for how special schools and colleges might consider and manage risks in supporting children and young people with complex needs towards managing children and young people with education, health and care plans: <u>guidance for</u> <u>special schools</u> , <u>specialist colleges</u> , <u>local authorities and any other</u> <u>settings</u> This covers recommendations for educational settings, working with local areas and families, on how to assess risks in supporting children and young people.	2	6 Low	https://www.gov.uk/government/ publications/coronavirus-covid- <u>19-send-risk-assessment-</u> guidance
30	Implementing protective measures in alternative provision (AP)	3	It is the Government's intention that all pupils in alternative provision (AP) settings (including pupil referral units, AP academies and AP free schools) will return to school full-time from 8 <sup>th</sup> March 2021. To support this return, AP settings must comply with health and safety law which requires employers to assess risks and put in place proportionate control measures. They should work through the system of controls to follow the same principles as mainstream schools, adopting measures as appropriate that help them meet each control in a way that addresses the risk identified in their assessment and that works for their setting to allow them to deliver a broad and balanced curriculum for pupils. When working through the system of controls, APs should take steps to minimise social contact and mixing as far as is practicable. All APs, especially larger AP schools, should consider whether pupils can be placed into smaller groups and still receive a broad and balanced curriculum. Due to the smaller size of many AP settings, and because APs are not typically organised by year groups, APs may wish to adopt whole school bubbles as part of their system of control and in order to	2	6 Low	https://www.gov.uk/government/ publications/coronavirus-covid- 19-send-risk-assessment- guidance



			best meet the needs of their students.			
			Staff should use simple language to explain safety measures, and reinforce key messages.			
			Safe routines for access to toilets, hand-cleaning and break and lunch times should be put in place. Teaching resources can be used to aid understanding.			
			Settings may need to carry out a risk assessment, if it is deemed that a child or young person may not be able to follow instructions, to determine what mitigations need to be put in place and whether, in rare circumstances, they should stay at home. For those children and young people with a social worker, our expectation is that they should attend their educational setting unless a risk assessment concludes they will be safer at home.			
31	Legionnaires Disease – Risk from re-opening schools following temporary closure or reduced occupancy	3	Opening after reduced occupancy It is important that you undertake all the usual building checks to make the school safe. If buildings have been closed or had reduced occupancy, water system stagnation can occur due to lack of use. This can <u>increase the risk of Legionnaires'</u> <u>disease</u> .	2	6 Low	
			Advice on safely reoccupying buildings can be found in the <u>Chartered</u> <u>Institute of Building Services Engineers' guidance</u> on emerging from lockdown.			
32	Returning to a DT or Art department after extended closure & Guidance on practical work	3	<b>CLEAPSS has provided guidance on practical work in schools</b> This is in addition to all standard operating procedures across your school and CLEAPSS Guidance in general. This should be reviewed alongside all guidance for your own setting. The guidance will be updated as more is learnt about these new ways of teaching, therefore please check regularly for updates on the CLEAPSS website.	3	9 Med	Stay up to date with the latest CLEAPSS guidance on COVID 19 <u>GL336 – CLEAPSS Advice</u> <u>during the COVID-19 /</u> <u>Coronavirus Pandemic</u>
33	Guidance for science departments returning to school after an extended period of closure	3	CLEAPSS has put together a list of important checks you should perform when your school re-opens. <b>GL345</b> – Guidance for science departments returning to school after an extended period of closure http://science.cleapss.org.uk/Resource-Info/GL345-Guidance-for-	3	9 Med	For further help or advice contact the CLEAPSS Helpline https://science.cleapss.org.uk/he lpline/
			science-departments-returning-to-school-after-an-extended-period-of-			



			Closure.aspxChecking the chemical storeThere may have been a spill or leak so keep safe by reading GL246before going in, and checkGL247advice on what to look for.Be particularly careful if the weather has been hot or you are unsure that the store is ventilated well.			
34	<u>Guidance for managing music.</u> dance and drama in school	3	Teaching music, dance and drama as part of your school curriculum, can continue as normal following updated DFE guidance released in August 2021.	3	6 Low	
35	<u>Wraparound Provision and Extra-</u> <u>Curricular Activity</u>	3	All Extra-Curricular provision can continue as normal following updated DFE guidance released in August 2021. For residential trips the school will not do any international visits before the start of the autumn term. From the start of the new school can go on international visits that have previously been deferred or postponed and organise new international visits for the future. There are no planned residential trips for the autumn term that have not been approved by EVOLVE at Hampshire.	2	6 Low	
36	Meetings Increased risk of close contact due to limited space and numbers of persons attending	3	Face to face meetings can continue as normal following updated DFE guidance released in August 2021	2	6 Low	
38	Covid-19 Related Incident Reporting All staff are at risk of the virus whether at work or in the wider community	3	All normal accidents or incidents should continue to be reported as usual using the online reporting system ( <u>HSMS</u> ). Where there is reasonable evidence that any reported case of Covid-19 is resultant of occupational exposure, this should be reported on <u>HSMS</u> , where it will be considered against RIDDOR guidance issued by the HSE.	2	6 Low	RIDDOR <u>reporting of COVID-</u> <u>19</u>



			<ul> <li>Head Teachers or their nominated deputy must review all incidents reported and take necessary actions as appropriate to prevent further occurrences where possible.</li> <li>A report under RIDDOR (The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) should only be made when: <ul> <li>an unintended incident at work has led to someone's possible or actual exposure to coronavirus. This must be reported as a dangerous occurrence.</li> <li>a worker has been diagnosed as having COVID 19 and there is reasonable evidence that it was caused by exposure at work. This must be reported as a case of disease.</li> <li>a worker dies as a result of occupational exposure to coronavirus.</li> </ul> </li> </ul>			
39	School Cleaning during Covid-19 (Coronavirus) outbreak Increased risk to cleaning staff from contracting Covid-19 (Coronavirus) during cleaning activities	3	Increased cleaning will reduce the risk of infection and guidance on school cleaning during the Covid-19 (Coronavirus) outbreak is available on Young Southampton. PPE requirements in relation to cleaning in schools may be slightly different to usual during the Covid-19 (Coronavirus) outbreak. Further information can be found via this link <u>Schools - What PPE to Wear</u> <u>During Coronavirus Outbreak</u>	2	6 Low	Follow the <u>COVID-19: cleaning</u> of non-healthcare settings guidance For further guidance see: <u>School Cleaning – Little and</u> <u>Often</u> <u>School Cleaning Manual –</u> <u>January 2020</u>
40	Air conditioning Risk of transmitting Covid-19 (Coronavirus) through air conditioning systems	3	<ul> <li>HSE Guidance states that the risk of air conditioning spreading coronavirus is extremely low.</li> <li>If you use a centralised ventilation system that removes and circulates air to different rooms, it is recommended that you turn off recirculation and use a fresh air supply.</li> <li>You do not need to adjust other types of air conditioning systems.</li> <li>If you're unsure, speak to your heating ventilation and air conditioning (HVAC) engineers or advisers.</li> <li>Good ventilation is encouraged to help reduce the risk of spreading coronavirus.</li> </ul>	2	6 Low	For regular HSE updates on coronavirus <u>visit HSE website</u>



41	Site Management during Covid- 19 (Coronavirus) outbreak	3	Where schools are closed or only partially open, it must be ensured that statutory compliance is complied with as per normal arrangements, including the ongoing need to ensure legionella controls are continued as normal and servicing and maintenance of boilers, LEV's etc. continue in line with their normal inspection and maintenance schedule.	2	6 Low	Schools who have subscribed to the Property Term Servicing Agreement can continue to receive support with regards to compliance and maintenance etc. as usual.
42	<u>Visitors</u> Increased risk due to unknown health or exposure	3	Visitors can now visit the school following updated guidance from the DFE in August 2021. A management outbreak plan is in place if required. Visitors must following our personal hygiene and respiratory hygiene routines.	3	9 Med	



# Hazard Impact Severity/Consequence if exposed to risk

Severity of the hazard if incident occurs				
Possible Rating qualitative equivalent		Examples		
1		No injury, damage, or sickness or other loss, i.e. of working equipment.		
2	Aid	First aid injury or illness, minor damage or loss. For example, scratch, bruise, minor cut, minor burns. Normal work possible after first aid treatment.		
3	Serious Harm -	Minor fractures (fingers & toes), temporarily disabling back injuries. Accidents result in an over 'three-day' injury or illness, substantial damage or loss.		
4		Major fractures (limbs, vertebrae etc.), eye injury, longer term disability long term sickness absence.		
5	Catastrophic Harm Fatality	Fatality, permanent disabling illness, blindness, catastrophic damage or loss e.g. loss of limb		

## Likelihood of being exposed to risk

Likelihood of incident occurring				
Rating	Possible qualitative equivalent	Examples		
1	Remote	Highly unlikely to occur		
2	Rare	May occur in exceptional circumstances		
3	Unlikely	Unlikely but could occur at some time		
4	Possible	Fairly likely to occur at some time or in some circumstances		
5	Likely	Will probably occur at some time or in some circumstances		
6	Highly Likely	Highly likely to occur		

# Covid-19 – Risk Assessment for Full Reopening of Schools – March 2021

## Health and Safety 6x5 Risk Matrix

Hazard Severity x Likelihood = RISK
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Risk	Level
Low	1-6
Med	8-12
High	15-20
V High	24-30

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**Risk Matrix** 

Likelihood rating

Hazard Severity rating

# Risk Control Plan

Risk level	Guidance on necessary action and timescale
Low (1-6)	Unlikely to cause serious injury, any actions need to be completed within 6 months. Periodic review to ensure controls are maintained
Medium (8- 12)	Will cause injury at some point; consideration should be given as to whether the risks can be lowered, actions to be completed within 1 month, regular review of controls to ensure they are maintained particularly if the risk levels are associated with harmful consequences.
High (16-20)	Likely to cause injury, substantial efforts required to reduce risk. Controls to be implemented as a prority.
High (25-30)	Will cause serious injury or worse, <b>consider stopping</b> , <b>suspending or restricting the activity</b> all risk reduction actions are immediate detailed planning and regular monitoring of controls. Temporary controls might be appropriate in the short term such as increased supervision.