

Covid-19 Risk Assessment Updated- September 2021

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. The government continues to manage the risk of serious illness from the spread of the virus and we are now in a new phase, Step 4, in the government response, moving away from stringent restrictions.

Whilst this continues to be 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 alongside targeted interventions to reduce risk to all members of the community.

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.
- There will be periods of sustained, community transmission and all staff and pupils could potentially be carrying Covid-19.
- Contingency plans will be in place to step measures up and down in response to potential outbreaks in school or the wider community

The national guidance and response requires us to prioritise being able to deliver face-to-face, high quality education to all pupils, minimising any disruption. The risk assessments already in place from Summer term 2021 have been reviewed and adapted. Essential control measures include:

- Robust hand and respiratory hygiene- good hygiene for everyone
- Maintenance of appropriate cleaning regimes
- Keeping occupied spaces well ventilated
- Following current public health advice on testing, self-isolation and managing confirmed cases of Covid-19



Potential Hazard	Risk	Who might be harmed?	Minimum control measures to reduce risks to an acceptable level	Bracken Leas Specific Actions to minimise risk
Covid-19 transmission	Staff not having appropriate knowledge on virus, transmission and risk leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public	All staff to keep themselves updated and follow the latest Government and national Public Health England/NHS guidelines via https://www.nhs.uk/conditions/coronavirus-covid-19/	All staff briefed Risk Assessments shared and School Guidance shared Continued relevant signage up around the school.
Covid-19 transmission	Contagious people coming into school leading to increased	Employee, visitors, agency staff, member of the public, Pupils	To help ensure that the risk of virus spread is as low as possible, the school will inform staff and potential visitors, including customers and contractors, not to enter the school if they are displaying any symptoms of coronavirus (COVID-19) or if they should be self-isolating.	Return to school letters emphasising no-one should return if unwell/ displaying symptoms Clear 'what to do if' guidance sent out about the revised



Transmission	transmission of covid-19	Employee	Anyone showing the symptoms (new continuous/ 'persistent' cough and/or a high temperature/ loss of taste or smell) should not come to work and should follow the relevant government protocols at home and before coming back to work; this will last at least 10 days. Anyone living in a household where someone is showing symptoms should follow the latest self-isolation guidance from track and trace according to their circumstances. If a symptomatic person comes into school, they will be sent home immediately or isolated until they can be picked up (see Appendix 4 Flow Chart- Suspected/ Confirmed Cases) All staff advised to participate in the LFD (Lateral Flow Device) testing twice a week reporting results on Wednesday and Sunday. Any member of staff or pupil who has recently visited countries outside the Common Travel Area must follow government quarantine law.	guidance for self- isolation periods to staff and parents. All contractors visiting the site to be made aware of covid risk assessments. Signage- entrances- not to enter with symptoms. Child/ member of staff falling ill- procedure to follow in Appendix 4 flowchart. Supply of LFD testing kits to all staff. Staff use agreement.
of Covid-19 via	transmission of virus on arrival at the	Employee, visitors, agency staff,	Temporary wearing of face coverings will be considered as part of contingency planning should there be a substantial	Walking to school encouraged in all parent guidance.



arrival at school	school premises	member of the public Pupils.	increase in positive cases (see Appendix 5- Contingency planning) Following risk assessments for events, face coverings could be recommended in busy and enclosed crowded spaces at times when adults may come in to contact with people they do not normally meet eg parent attendance for school plays All children are encouraged to wash hands before attending school and use hand gel on entry.	Signage on entry about not entering with symptoms. Hygiene Protocol/ Handwashing protocol for all staff and pupils. Hand sanitiser at entrances.
Poor hand & respiratory hygiene	Poor hand & respiratory hygiene leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public, Pupils	Follow Hand Washing protocol at appendix 1 below https://www.who.int/gpsc/clean hands protection/en/ 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-	Increased signage in all toilet areas. Toilets allocated to key groups/ bubbles Children taught about hand washing technique and reminded daily. 'Hygiene for everyone' protocol – all children are encouraged to wash hands before attending school and



destroying friction that rubbing your hands together and rinsing with water provides.

Staff, visitors and pupils should be reminded to clean their hands for 20 seconds more frequently than normal, including on arrival at the setting, before and after eating, and after sneezing or coughing.

Staff should supervise young children to ensure they wash their hands for 20 seconds with soap and water (or hand sanitiser if soap is not available or feasible in the particular situation)

Coughs and sneezes to be caught in tissues. Bins for tissues should be emptied throughout the day.

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.

use hand gel on entry and after breaks. Hand gel will be used upon changing rooms and before going to the toilet. Children will wash hands before lunch and after using the toilet. Children will use hand gel at the end of the day before they go home.

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.

Bins emptied at lunchtime and end of day.

1:1 Provision maps for SEN/ separate risk assessment



Surfaces contaminated with Covid-19	Increased transmission of covid-19 via surface – face contact	Employee, visitors, agency staff, member of the public	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings (July 21) Regular points of contact such as door handles, light switches, work surfaces, remote controls and electronic devices 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. As a minimum, frequently touched surfaces should be wiped down twice a day. All areas of the school should be 'clutter free' and all surfaces kept clear for easy cleaning. Items that need laundering eg cloths, towels will be washed regularly in accordance with the manufacturer's instructions, on the warmest water setting 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.	Extra enhanced cleaning throughout the day- times of cleaning recorded/ member of staff. Checklists for cleaning checked, signed and stored by site supervisor. Site Supervisor monitoring and reviewing cleaning schedule/ adjusting rotas as necessary Classroom 'bubble' surfaces are wiped down at least twice a day Key shared areas cleaned at lunchtime and at the end of the day- all toilets and sinks. -All children hand gel on entry to the hall and exit from the hall
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Lack of ventilation	Increased risk of covid 19 transmission	Keep all occupied spaces well ventilated, including classrooms, shared areas and office spaces: -natural ventilation- opening windows enough to provide	Extra cleaning to take place after an external letting as per lettings policy. Well-ventilated occupied spaces- windows/doors open as far as reasonably practicable.
		constant background ventilation and opened more fully during breaktimes. -keeping internal doors open to assist with creating a throughput of air	With colder weather, classrooms to be crossventilated for a minimum of 50 mins at the end of the day
		-using external doors to cross-ventilate during breaktimes (where safe to do so and in line with fire risk regulations)	when pupils have left. During the day, classrooms to be aired at breaktime and
		Ensure and maintain a comfortable teaching and working environment by: -opening high level windows to reduce draughts	lunchtime when the children are outside.
		-increasing ventilation while spaces are unoccupied -providing flexibility to allow suitable additional indoor clothing	
		-rearranging furniture where possible to avoid direct draughts -use heating to ensure comfort levels in occupied spaces	



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Intimate care and minimising the risk of Covid-19	Intimate care procedures leading to increased transmission of covid-19	Employee, visitors, agency staff, member of the public, Pupils	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.	Intimate care as per school policy- first aid/ administering medicine. All staff to wear usual apron/ gloves. PPE available for use in First Aid room. Basic First Aid kits in every classroom.
			If you are not providing intimate care to someone, PPE is not needed.	
			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 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).	PPE should be worn in circumstances that require close attention (eg medical/intimate care). Judgement should be used about the need for PPE in other circumstances.



	Category	PPE Requirements	Educational Setting	All staff briefed on PPE usage in situations that
1	Staff / Pupil interaction where distance of 1m can be maintained throughout	Close adherence to hand (i) and respiratory hygiene protocols (ii). No additional PPE required beyond what would usually be worn for any given task	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.	require more intimate care/ close attention. PPE equipment available in each class and the medical room.
2	Staff / pupil interaction where momentary (iii) physical contact is required or cannot maintain 1m distance.	Close adherence to hand and respiratory hygiene protocols. Surgical facemask to be worn by member of staff. Sessional (iv) use is adequate in these circumstances.	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



3	Prolonged/intimate (v) physical contact is required between member of staff and Pupil.	Close adherence to hand and respiratory hygiene protocols. 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).	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.	
	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 births, phlebotomy in non-compliant patients etc.	
NB: This summary relates to PHE's COVID-19: infection prevention and control, la updated 6th April The majority of staff will not require PPE beyond what they would normally need for their work. PPE needs to be worn it very small number of cases, including:	
 Where an individual child or young person becomes 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 use 	
In circumstances where staff feel PPE is appropriate following the principles above careful judgement should be used to	ng



			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. Based on current evidence and the current protective measures and controls in place, face coverings will not generally be worn in school unless specified as listed above.	
Managing risk of an individual displaying symptoms	Proximity to a person displaying covid-19 symptoms leading to increased transmission of covid-19	Employee, pupils, agency staff, member of the public	If a symptomatic person comes into school, they will be sent home immediately or isolated until they can be picked up. 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. 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. - If a distance of 2m can't be maintained, supervising staff will wear a fluid-resistant surgical mask	Allocated room for isolation-FIRST AID room clearly marked with signage 'ISOLATION ROOM'. Anyone in the building displaying COVID-19 symptoms to be isolated immediately there. 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.



-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

Supervising staff will wash their hands thoroughly for 20 seconds after the pupil has been picked up.

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.

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.

The toilet area used by the ill person showing symptoms to be cleaned immediately and the working area they had been in.

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.

Return to school/ work if the test is negative and when they are well. If the test is positive, the individual will follow current self-isolation advice for a period of 10 days.



All areas that the symptomatic person has been in will be deep cleaned immediately and all PPE disposed of properly, following decontamination guidance.

If the school becomes aware that a pupil or staff member has tested positive for coronavirus, the school will record this and contact the local health protection team for advice and action if the threshold has been reached (See Appendix 5- Contingency Planning)

https://www.gov.uk/guidance/contacts-phe-health-protection-teams

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.

If the threshold is reached of 5 pupils, children or staff, who are likely to have mixed closely, testing positive within a 10-day period, additional measures could be applied temporarily (see Appendix 5- Contingency planning)

Identifying a group that could have mixed closely could include:

- A form group or subject class
- A friendship group mixing at breaktimes



			 A sports team A group in an after-school activity Continue to keep records of all information given by parents regarding Covid-19 testing, negative and positive results and self-isolation periods, including travel and quarantine. 	
Fire Safety	Risk of confusion caused by new locations/ routes/ assembly points due to Covid-19	All pupils and staff	Fire safety policy will be reviewed and amended to take account of any site or procedural changes necessitated by Covid-19 contingency planning.	Covid-19 Appendix update to fire procedures if needed in the event of contingency planning actions.



Appendix 1: Clean hands protect against infection (WHO protocol)

Protect yourself

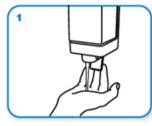
- Clean your hands regularly.
- Wash your hands with soap and water, and dry them thoroughly.
- Use alcohol-based hand sanitiser if you don't have immediate access to soap and water.

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





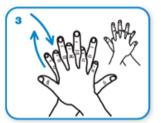
Wet hands with water



apply enough soap to cover all hand surfaces.



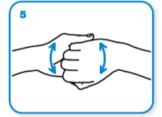
Rub hands palm to palm



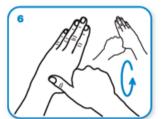
right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



backs of fingers to opposing palms with fingers interlocked



rotational rubbing of left thumb clasped in right palm and vice versa

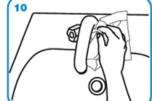


rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



Rinse hands with water









Appendix 2

i.	Handwashing Protocol	Attached at appendix 1 above https://www.who.int/gpsc/clean hands protection/en/
<u>ii</u>	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=govuknotific_ations&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

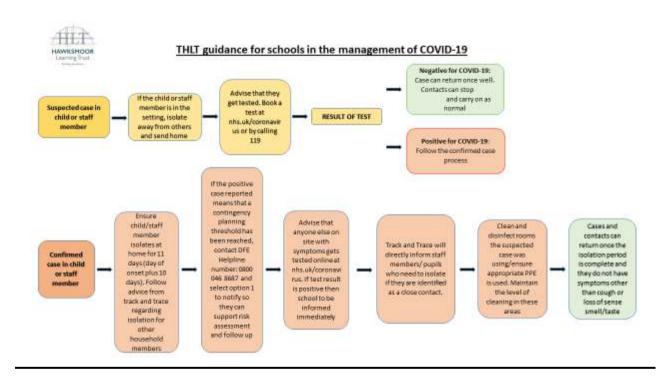


- people having immunotherapy or other continuing antibody treatments for cancer □ people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
- people who have had bone marrow or stem cell transplants in the last 6 months, or 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





Appendix 5- separate document- Contingency Planning

Supporting Documents/ Resources

National Guidance- Key Documents



https://www.gov.uk/government/publications/preparing-for-the-wider-opening-of-schools-from-1-june/planning-guide-for-primary-schools

 $\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/government/publications/covid-19-implementing-protective-measures-in-education-and-childcare-settings}{\frac{https://www.gov.uk/gov.uk/gov.uk/gov.uk/gov.uk/gov.uk/gov.uk$

https://www.gov.uk/government/publications/actions-for-educational-and-childcare-settings-to-prepare-for-wider-opening-from-1-june-2020

https://www.gov.uk/government/publications/actions-for-educational-and-childcare-settings-to-prepare-for-wider-opening-from-1-june-2020/opening-schools-for-more-children-and-young-people-initial-planning-framework-for-schools-in-england

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

 $\frac{https://www.gov.uk/government/publications/managing-school-premises-during-the-coronavirus-outbreak/managing-school-premises-which-are-partially-open-during-the-coronavirus-outbreak}{}$

https://www.gov.uk/government/publications/preparing-for-the-wider-opening-of-early-years-and-childcare-settings-from-1-june

School

Covid-19 May 2020 School Guidance

THLT Guide to returning to school for Parents (PPT)

Staff Briefing- School re-opening (PPT)

1st June return plan- staff/ bubble allocation/ timings

Playground Zones/ site plan

Letter to Parents- Outline plans for Opening 20/5/20

Bracken Leas Behaviour Policy Appendix



Return to School Transition Plan 19/6/20

Adapted plans- playground zones/ timetables 19/6/20

Updated Guidance for September reopening 2020

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools

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https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures#

Updated DfE Guidance October 22nd 2020

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools

School updates

Northants Local Authority Headteacher Letters and Advice

Adapted plans- playground zones/ timetables 23/10/2020

Update letters to parents/ reviewed procedures

Local Authority Public Health advice passed on to parents



Increased signage in school provided by LA

Updated DFE guidance 30th December 2020

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools

Contingency framework planning- January 1st 2021

https://www.gov.uk/government/publications/coronavirus-covid-19-contingency-framework-for-education-and-childcare-settings/contingency-framework-education-and-childcare-settings-excluding-universities

https://www.gov.uk/guidance/local-restriction-tiers-what-you-need-to-know

Updated DFE guidance February 2021- March 8th Operational Guidance

 $\underline{https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak}$

School updates

Northants Local Authority Headteacher Letters and Advice

Adapted plans- playground zones/ timetables 25/2/2021

Update letters to parents/ reviewed procedures

LFD Testing Agreements



LFD test result flowchart of action for staff

Updated DFE guidance August 17th 2021 Operational Guidance/ Contingency Planning

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1011704/20210817_Contingenc_y_Framework_FINAL.pdf

School Updates and Contacts

DfE helpline 0800 046 8687 Option 1

Return to school letter for parents- September 6th 2021

Return to primary education leaflet for parents- September 2021