

Establishment name:

South Tawton Primary School

Initial Assessment		Date of Initial Assessment: 01/09/2020
Review	\boxtimes	Assessor(s): JHW
Following Incident		Date of Review: 08/03/2021
		Assessor(s): JHW

Activity/Task/Process/Equipment

COVID-19 2021. School full return - March 2021 Review v1.6

(NB Other risk assessment findings and policy arrangements apply where unaffected by COVID-19)

Summary of changes:

- All changes in RED
- Twice weekly LFD testing for staff at home
- Continuation of CEV shielding
- Face coverings in circulation spaces and common areas where social distance cannot be maintained
- Stricter PPE requirements for staff leaving 2m socially distanced zone

Summary of hierarchy of controls:

- Monitor and isolate all who have symptoms maintain guarantine arrangements, cooperate with PHE (testing, track and trace)
- Twice weekly asymptomatic LFD testing for staff
- Continue to protect the vulnerable/extremely vulnerable in line with national guidance and by local risk assessment
- Regular and repeated hand washing/sanitising: on arrival, before food, after washroom visit, on entry/exit to room.
- Good respiratory hygiene practice
- Enhanced cleaning regime
- Avoid mass congregation: no assemblies, segregated lunches, virtual staff meetings, managed access to toilets.
- Class groups to remain segregated in 'bubbles': pupils and staff not to mix, stagger breaks to limit population congregation; segregate exits entrances where possible, stagger start-end times (siblings excluded)
- Limit sharing of equipment and avoid across class bubbles personal equipment where possible (PE/Art activities to be risk assessed).
- Face coverings mandatory for staff in circulation spaces and common areas
- PPE for selected staff who work in close proximity for <2m for >15 minutes or <1m for >1 minute (1:1 Work, First Aid etc)
- School discipline: policy amended to account for those who disrupt/endanger fellow pupils/staff.

Significant hazard	Who/what is at Risk?	Risk			Control measures in place
		L	S	R	
Essential premises services to keep school open Injuries or ill-health arising from failure to maintain the building examples include: legionella contamination, CO production, failure to raise alarm in event of fire etc.	Staff, pupils	>1	5	>5	 Essential site maintenance should continue as normal and as determined by the timetable established on the Every system (Activities module) Every system used to monitor essential site maintenance: Compliance module can be scrutinised to identify gaps in maintenance provision. Annual H&S Review process will also monitor Contractors entering site will do so by appointment and will abide by hygiene controls and work to 1m plus social distancing rules.

- · Re-Opening Health and Safety Check List completed on 14.01.2021 following onsite inspection [Appendix 1] (SM, AK)
- · Ensure all are evident clearly in the Every System (EU, SM, JW) LB:

· Check with hall committee that all compliance is in place (SM/SC)

· Check with hall committee that all co	impliance is in place (Si	VI/3C)	<u> </u>		
Staff or pupils with symptoms Potential for contracting COVID-19 via direct or indirect contact with someone displaying symptoms	Staff, pupils	1	4	4	 No staff or pupils to attend if they are symptomatic. Contact-free thermometers to be provided at each site to monitor pupils if they feel unwell. Those who display symptoms of one or more of the following: New and continuous cough high temp >37.8 loss/change to sense of smell/taste must return home as soon as possible to start period of isolation for 10 days from onset of symptoms. This individual must get a test. Household members of this individual to isolate for 10 days, or until: They develop symptoms themselves whereupon they should be tested and isolate for 10 days from onset of symptoms Until receipt of negative test result by person who is symptomatic. Test kits available for those who cannot, or will struggle to, access a test. Schools can re-order as needed. Isolation room provided for those with symptoms to wait until collected. Those displaying symptoms are to cover their mouth/nose with a tissue or paper towel until they can leave. Stocks of tissue, hand-sanitiser and cleaner-sanitiser to be located in this room. PPE also to be to hand for use by staff assisting this person if this is unavoidable (see First Aid section). The room must then be cleaned in line with previously circulated guidance.

					 If visual contamination is evident in the room e.g. saliva on table surfaces etc then PPE in the form of gloves, apron, respirator to be worn for clean. Contaminated area to be pre-treated with Titan sanitiser. Flow chart (v7.0) from PHE SW to be followed in respect of any person who has tested positive. DfE phone number to be used as initial point of contact. Actions on flow chart followed depending on test result. If negative, child can return to school after end of symptoms. Positive test result would be communicated to DfE helpline. All instruction received from the HPT at PHE SW would be followed. Close proximity contacts to be sent home to isolate for 14 days. Class charts to be maintained so school can quickly identify proximity contact. However, if required by HPT risk assessment, whole class bubble will be sent home to isolate for 14 days.
Asymptomatic transmission Potential for contracting COVID-19 via direct or indirect contact with someone NOT displaying symptoms	Staff	1	4	4	 Twice weekly lateral flow device (LFD) testing of staff to be undertaken on an ongoing rotational basis. Tests to be undertaken 3-4 days apart. Separate risk assessment describes controls, consent process and training requirements for LFD testing. Risk assessment record follows format determined by NHS Track and Trace. Any staff member testing positive will not come into work but will isolate as soon as the notification has been received for 10 days. They will take the full PCR test to confirm. Pupils will not be tested. Potential for asymptomatic transmission from pupils to be managed via maintaining social distance and the wearing of PPE as described in the section entitled 'social distancing' described below.

- · Clear roles and expectations defined for all staff whether they are working from home or on site (EU, SM) [Appendix 4] Unwell pupils to isolate in TA room
- LB
- · Isolate in committee room
- · Ensure PPE supplies are in place and maintained. Extra PPE to be collected from/delivered by school as necessary.

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Shielding the vulnerable - CEV Potential for contracting COVID-19 via direct or indirect contact whilst attending school site with elevated consequence	Staff, pupils, co- habitants of staff/pupils	<1	5	5	 Staff Clinically Extremely Vulnerable (CEV) who were shielding up until 02.12.2020 after receipt of letter from GP or NHS should continue shielding and work from home. Original risk assessment for these staff members (for September return) should be reviewed. Clinically Vulnerable (CV) staff (expectant mothers, over-70s,
Shielding the vulnerable – CV Potential for contracting COVID-19 via direct or indirect contact whilst attending school site with elevated consequence	Staff, pupils, co- habitants of staff/pupils	1	4	4	BAME staff, those with medical conditions whereby they are advised to have an annual flu-jab) must have been risk assessed ahead of the September return by their line manager. Controls measures could be: strict social distancing of 2m at all times, work away from higher risk pupils, avoid close contact 1:1 work, avoid direct face to face contact, PPE, other work tasks which avoid direct close contact. The school will try as far as practically possible to accommodate additional measures where appropriate. A separate risk assessment record must be completed to record the findings of the assessment. A format has been circulated for this purpose. Risk assessments for CEV/CV staff should be subject to ongoing review Pupils: Pupils who continue to be identified as being in the CEV category (as identified by letter) by their clinician should continue to learn via remote learning at home. Pupils in this category will be offered access to remote education and engagement with this activity will be monitored.

	 Risk assessments should be completed for pupils with EHCP to identify additional control measures necessary to control the risks to the individual, their peers and the staff who work with them. A format has been circulated for this purpose. This process should be led by the SENDCO The risk assessment should continue to consider the balance of risks between attending school and remaining at home. IHCP to be reviewed to ensure all students with medical needs can attend school with all protective elements of plan in place.
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- · Staggered arrival and departure times ensure social distancing while hand over takes place timings will ensure siblings have matching times. [Specific School Detail STP [Appendix 5]
- · Each classroom contains approximately 30 children. (32 in year 5)
- · Each classroom has an internal and an external door. The internal door will remain open with windows also open.
- Each bubble will have a separate access to outdoor space, staggered and/or separated to ensure that bubbles of children don't mix it is important that there is access to outdoors most of the time where possible, especially for pre-school and reception.
- · Morning drop offs and end of day collection will be staggered.
- · Children will be met by staff members and escorted to classrooms/play areas.
- · Parents will remain outside the gates and not enter the school site.

Social distancing Potential for contracting COVID-19 via direct contact whilst attending school site Staff, pull	s 2 3	3 6	 Pupils: Population density will mean that pupils will not be able to maintain social distancing upon a full return. Principal control measure there shifts to maintaining class 'bubble' and avoidance of mass congregation. Class bubbles not to mix: no assemblies and food provision organised to minimise congregation (see food provision below). No PE activities across classes. Staggered start/end times to minimise mass contact at beginning and end of day or start/end time to be segregated by space with separate entrances etc. Staggered break/lunch times or breaks segregated by space
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- where segregation by time is not possible.
- Where possible, one-way system to be maintained to reduce corridor congestion as well as entrances direct into the classroom where possible.
- Classrooms laid out to avoid face to face positioning with tables in rows, facing forwards.
- Pupils should be self-sufficient in terms of equipment: all equipment used every day i.e. pens, rulers etc to be brought from home and to be for that pupil's personal use only.
- Curriculum to be limited to reduce PE or other practical activities involving shared equipment across class bubbles.
- Where the sharing of equipment across class bubbles cannot be avoided, specific risk assessment to be undertaken to identify compensating hygiene controls. This could be sanitising items or quarantining them for 48 hours (72 hours for hard surface items like plastic).
- Extra-curricular activities (that is, before and after school clubs)
 will only continue where it is possible to provide this within the
 limitations of this risk assessment i.e. to maintain integrity of
 class group bubbles.

Staff:

- Staff should maintain a social distance between one another, and between themselves and pupils, of 2m wherever they can unless subject to a separate risk assessment.
- Staff briefings to be virtual. Where physical meetings cannot be avoided, meetings to maintain 2m distance.
- There should be no contact of less than 2m for more than 15 minutes.
- Where the demands of classroom teaching require movement within the 2m limit, there should be <u>no contact of less than 1m</u> <u>for more than 1 minute.</u> Face shields to be worn in these instances.
- There should be **no direct face to face contact within 1m for**

- **anytime.** Assist students by looking over their shoulder or remain side by side.
- When moving out from the segregated 2m zone to assist pupils, teaching staff should wear a Type IIR disposable medical mask.
- Regardless of wearing this mask, the following distancing measures should still be maintained:
- Staff should avoid close and direct face to face contact with pupils. Assist pupils by looking over their shoulder or remain side to side.
- Individual risk assessments should be completed for pupils who require 1:1 support where close proximity (see above definition) contact cannot be avoided. The assessment must consider the specific needs of the child as well as the staff member supporting them. PPE needs for staff should be identified here.
- 1:1 support staff to limit direct face to face contact as far as is practicable by positioning side to side.
- This specific risk assessment should identify additional PPE (face shield, disposable medical mask) taking into account the needs of the child and the member of staff.
- Additional hygiene controls are described below for Nursery/ KS1 in recognition of the reduced ability of staff in these areas to maintain social distance.

Visitors:

- Only visits that are absolutely necessary are permitted. Only visits with a prior appointment will be made. Parents and adhoc visitors must not be granted access and reception should remain closed. Signs should be displayed with a telephone number or e-mail for essential appointments to be made.
- Where reception remains unprotected, a reception screen is installed to protect reception staff.
- A meeting room is set up to allow meetings with an advanced appointment to take place in accordance with 2m social distancing.
- Contractors who must attend for essential maintenance must

follow hygiene practices and must maintain social distance, as with staff. Wherever practicable (and as is consistent with safeguarding protocols), they must be left alone in the room where their work can be undertaken (e.g. plant room etc).

Food provision:

- Pupils partaking in school meals pre-order from a limited menu option.
- Food pre-paid no payments upon collection to speed up collection
- HACCP reviewed by kitchen managers to control any additional COVID-19 risk areas in food production.
- Pupils to remain segregated by space when eating food, either in the dining hall with tables >2m apart or remaining within their classrooms.
- Limited menu choices to speed up delivery/collection
- Food either delivered to class or collected in class-rotas to limit queueing and maintain class bubble
- Cutlery handed out to prevent cross contamination at the point of collection
- Hand-hygiene before and after consumption of food.
- Staff well-being will be carefully managed through release time for breaks, whilst still ensuring a reduction of movement around the school.
- Staff toilet arrangement takes account of social distancing.
- Telephones are available in every room to ensure full communication across school, and for use during lockdown and fire drill.
- Where staff are working between bubbles good hand hygiene and social distancing will be applied.
- Extra-curricular clubs will operate for separate bubbles in the first instance.
- Where peripatetic music tuition goes ahead, it will be under strict hand hygiene and social distancing measures.
- All KS1 children to eat pre-ordered hot meals in the school hall in segregated bubbles
- KS2 school dinners to be eaten in the hall, but packed lunches to be eaten in classrooms/outside.
- Dinners to be served by staff to avoid queuing.
- All equipment to be washed at a high temperature.
- Hygiene procedures to be followed.

LB:

- · Wear PPE for nappy changing and intimate care
- · Parents to hand sanitise before entry and on exit if needing to accompany children for settling purposes. Otherwise, all parents to hand over at hall door and not enter premises. Masks to be worn by staff and parents at this time.
- · Parents to distance themselves and to keep distance from staff.
- · Packed lunches only. Fruit and milk to be distributed by staff following hand hygiene.

Hygiene Potential for contracting COVID-19 via direct and indirect contact whilst attending school site	Staff, adult co- habitants of pupils	2	3	6	 Hand-hygiene: Ongoing regular hand-hygiene is the principal control for indirect transmission. Hand washing or hand sanitising with alcohol hand sanitiser must be undertaken at the following times: Upon arrival at class base at day's start
First Aid Potential for contracting COVID-19 from direct and indirect contact with child due to administration of First Aid	First Aid staff	2	3	6	 After using a washroom Before and after food Upon entering and leaving any class bubble After coming in from outside recreation Upon final departure After removing PPE Therefore, hand- sanitiser must be available at the entrance/s to each teaching space and class bubble.
Nursery/Early years Potential for contracting COVID-19 via direct and indirect contact whilst attending school site	EYFS Staff, adult co-habitants of pupils	2	3	6	 Staff to undertake hand-hygiene after handling pupils' work. Hand hygiene should also be undertaken after use of any shared resources within the class bubble. Staff should supervise hand sanitising in teaching spaces. All visitors must wash/sanitise their hands upon arrival and departure
Lack of ventilation Potential for contracting COVID-19 via direct contact due to poor	Staff, adult co- habitants of pupils	2	3	6	 Respiratory hygiene: Good respiratory hygiene – 'Catch it, Bin it, Kill it' to be followed and modelled as much as possible. Tissues and covered bins to be provided in each room Behaviours to be taught and modelled at all ages.

21.2	
ventilation	 Regular checks of washrooms must be undertaken to ensure
	that stocks of soap etc are available.
	 Where possible, toilets dedicated to specific class bubbles.
	 Pupil access to washrooms to be controlled to limit numbers as
	well as to control behaviour.
	 Message to be reinforced by posters displayed around the site
	 Some pupils with complex needs will struggle to maintain as
	good respiratory hygiene as their peers. This should be
	considered in pupil specific risk assessments in order to support
	these pupils and the staff working with them.
	Face coverings:
	A face-covering offers little protection to the individual
	but it will protect others from the individual by limiting the
	travel of their breath or cough/sneezes. By this means
	the build, up of contaminated aerosols will be limited.
	 Separate guidance on use of face-coverings.
	 Separate guidance on use of face-coverings. Face coverings mandatory by staff in circulation spaces
	and common areas unless there is a specific exemption
	provided.
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	 See also PPE guidance for staff within teaching spaces
	above.
	Cleaning:
	 Demands of whole school opening in combination of reduced
	national risk means all rooms utilised in the timetable should be
	cleaned daily with an additional interim clean of regularly
	touched surfaces during the day. Nursery and KS1 should be
	cleaned in response to need as identified by staff.
	Reduction in displays around rooms to limit clutter and potential
	for trapped dirt to gather.
	Clear desk policy: staff to clear hard surfaces to allow for
	cleaning.
	 A combined cleaner-disinfectant to be used which is BSEN1276
	compliant.
	 Launder cloths daily or use disposable paper towels/rolls.

- Cleaning protocol circulated. Regularly touched hard-surfaces to be sanitised: tables, desk tops, light switches, keyboards/mouse, phones, taps, flush handles.
- Roving cleaning staff throughout day to clean regularly touched corridor surfaces (door handles, taps, bannisters etc)
- Cleaner-disinfectant and paper towels to be located in teaching spaces for staff to clean if they see the need i.e. if a child sneezes on a desk top etc.
- Cleansing wipes to be located by photocopiers to allow users to wipe buttons/touchscreen after each use.
- Please refer to Cleaning Guidance for full details of cleaning methodology plus a suggested example cleaner/disinfectant.

Nursery/Early Years:

- Evidence shows that the risk of direct transmission is lower with young children. Nevertheless, due to the reduced capacity of younger children to follow hygiene norms and social distancing rules, indirect transmission risk may be slightly higher. Therefore:
- The following additional precautions over and above what is listed above should be employed:
 - Nursery/KS1 classes to be cleaned in response to need but at least twice daily
 - More frequent hand washing should be undertaken by both staff and children – a suggested frequency is hourly.
 - Model and supervise correct hand-washing.
 - o Staff should wear a disposable apron.
 - Avoid/limit direct face to face contact at the level of the child.
 - If experience shows continued close contact with a child cannot be avoided, and there is a risk of coughs/sneezes being directed in the face, then PPE in the form of a face shield should be worn.
 - An additional risk assessment should be undertaken for

- any staff vulnerable staff working in this area as described above.
- Intimate care of very young children must continue using established protocols. Robust hygiene controls must already be established in this area. Please refer to existing risk assessment and planning documents.
- A cleaner-disinfectant and a stock of paper towels should be available in the area for staff supervising young children so that obviously contaminated surfaces can be cleaned as required throughout the session as needed. This must be stored securely out of reach of the children concerned.
- Limit the number of toys available so that their hygiene can be better maintained. Choose toys that are easy to clean.
- Avoid unnecessary sharing of equipment within class bubble and share no equipment across class bubbles.

First Aid:

- Delivering First Aid will often necessarily mean that staff have to remain for several minutes in close proximity (<1m) to a pupil often face to face. A higher level of control is therefore needed.
- PPE is required in these instances and should be provided in the form of a medical face mask and face shield
- The medical face mask to be replaced with a FFP2/N95 respirator *if the person displays symptoms and approaching them is unavoidable*. The first control measure is not to approach the person with symptoms if at all possible.
- Disposable gloves should be worn
- If people report to First Aid with COVID-19 symptoms, beyond testing temperature if needed, they should NOT be treated by First Aid but should be shown to a separate isolation room where they can be isolated until they return home. They should be required to cover their mouths with a tissue/paper towel until this happens.
- A contactless thermometer is available to take a temperature.
 PPE will nevertheless be worn as described above.

 Have a room set aside for this eventuality and have a supply of tissues/paper towels on hand.

PPE - please note:

- PPE for the purposes of infection control in the form of gloves, face masks/respirators and face shields must be used with caution as cross contamination of the virus can occur with PPE if it is not used correctly
- If disposable gloves are worn, change them frequently by removing them from the wrist and continue to wash your hands.
- PPE face masks/respirators must be removed by the ear pieces/ties. Face shields by the back of the securing band. In all cases avoid touching the front of the mask/shield which could be contaminated.
- Always wash your hands after removing PPE
- PPE can be a flawed control measure if used incorrectly. It relies on good fit and correct usage. It can itself become contaminated. Do not let wearing PPE lull you into a false sense of security and avoid prolonged close, face to face contact as the control measure of first choice.
- Briefing document for safe use of PPE circulated.

Ventilation:

- Occupied teaching spaces to be ventilated by opening windows.
- Doors into room can be propped open when the room is occupied <u>but teaching staff must close these when the room is unoccupied.</u>
- Air handling units and other mechanical ventilation systems should be used if the school has these. It should be ensured that these systems are <u>not</u> set to air re-circulation only.
- Re-circulating only air-conditioning systems not to be used in place of open windows and fresh air ventilation but can be used so long as source of fresh air available
- Source of fresh air to be maintained in winter months when weather is colder whilst maintaining statutory minimum

	temperatures by: Open all windows by a small amount Opening doors to aid cross-ventilation (subject to controls for fire doors above) 'Flush' rooms at break times by opening all windows to fullest extent for 2 minutes. Allow pupils to wear jumpers/hoodies/coats
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- · Resources will be available to the pupil and will be stored in their trays to ensure clear table policy for nightly deep clean.
- · Equipment shared within the class bubble will be cleaned and sanitised regularly.
- · Where equipment has to cross between class hubs perhaps PE equipment then this will be sanitised after use so that nothing can be passed onto another class bubble.
- · Every room has a resource list of what they should have available they must inform SM if it runs low (this will also be checked each night during cleaning).[Appendix 6]
- · Each room will have a reminder check list of what should be completed on a daily basis i.e. open windows, clean down all resources as they are used etc.. [Appendix 7]
- · 'Before you attend school pack for parents' contains information regarding hygiene etc... this will also be the focus of the morning reminder every time the children start a new day. [Appendix 8]
- · Room and toilet checks will be made regularly
- · Where appropriate, doors will remain wedged open.
- · Children will be supervised to sanitise their hands prior to and after using the library. Books which have been withdrawn for reading will be quarantined on return for 72 hours.

LB:

- · Ventilate as much as possible given that windows don't open. Fire escape door cannot be left open due to risk of children leaving through it. Open committee room doors to allow air flow if appropriate. If hall doors are open, member of staff to be stationed next to door at all times.
- · Staff to clean high traffic surfaces and shared equipment regularly.
- · Toilets to be disinfected at lunchtime and end of day.
- · No sand and no malleable resources unless they are disposed of at the end of the session. Limit soft furnishings such as cushions.

Cleaning tasks	Cleaning staff	2	3	6	 See separate cleaning guidance and associated risk assessments
Potential for indirect contracting of					 Cleaners' PPE to be disposable gloves and disposable or

COVID-19 whilst undertaking cleaning			 laundered aprons. FFP2/FFP3/N95 respirators are for direct contact (within 2m for >15minutes) with an individual who is displaying symptoms so should NOT normally be required for these tasks – refer to cleaning guidance. See exception below. If not disposable, laundered aprons should be washed on the hottest wash possible for the clothing concerned Removed PPE to be double-bagged for disposal A cleaner-disinfectant/cleaner compliant with BSEN1276 to be used. Usual COSHH risk assessment findings to be followed in respect of chemical safety and use. Please refer to Cleaning Guidance for full details of cleaning methodology plus a suggested example cleaner-disinfectant. Launder cloths daily or use disposable paper towels/rolls. All staff to follow a 'clear-desk' policy to enable regular cleaning of all hard surfaces. Unnecessary paperwork and displays to be removed to allow surfaces to be sanitised. Cleaning of isolation room: if visual contamination is evident in the room e.g. saliva on table surfaces etc then PPE in the form of gloves, apron, respirator to be worn for clean. Contaminated area to be pre-treated with Titan sanitiser as described in Cleaning Guidance document.
· All staff to refer to DMAT Cleaning C	er instructions from Alar Guidance [Appendix 10] oment in line with guida		enal manager, reinforced by STP leadership as to safety measures. ening hirers arrive. Victory hall have responsibility to ensure hall is

Potential for direct and/or indirect contracting of COVID-19 whilst undertaking cleaning ### Wherever possible — walking, cycling, private car travel. ### The Trust is not the principal duty holder in respect of transport organised by others. The strategy will therefore be to cooperate with and communicate the risk assessment findings of other partner organisations as well as reinforcing and communicating government guidance for the safe use of general public transport. #### Class segregation will be maintained wherever practicable. #### DCC Transport Coordination Service risk control measures to apply. #### In line with government guidance for public buses, Year 6 pupils over the age of 11 travelling on TCS buses will be encouraged to wear a face-covering. (This is only a requirement on dedicated school transport from Year 7 upwards). ###################################			
	contracting of COVID-19 whilst		 The Trust is not the principal duty holder in respect of transport organised by others. The strategy will therefore be to cooperate with and communicate the risk assessment findings of other partner organisations as well as reinforcing and communicating government guidance for the safe use of general public transport. Class segregation will be maintained wherever practicable. DCC Transport Coordination Service risk control measures to apply. In line with government guidance for public buses, Year 6 pupils over the age of 11 travelling on TCS buses will be encouraged to wear a face-covering. (This is only a requirement on dedicated school transport from Year 7 upwards). Any child over the age of 11, unless exempt, must wear a face covering on public transport. Any child, young person or other learner who starts displaying coronavirus symptoms while at their setting should wherever possible be collected by a member of their family or household. Transport provider to clean regularly touched hard surfaces between uses All passengers alighting from a bus will sanitise hands upon entering the building. Similarly, transport users will sanitise

- Children to book onto bus through school gateway accounts. Parents to liaise with Devon CC re transport needs.
- Driver to wear a mask.
- Hands must be sanitised on arrival at school and before leaving school to get on the bus.