

**POLICY AMENDMENTS**

**IN RELATION TO**

**COVID-19 PANDEMIC**

**MAY 2020 ONWARDS**

**Updated January 2021**

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# HOW TO USE THIS DOCUMENT

**Please note: the updates to policies referenced in this document relate to the statutory guidance from the government which is being issued as a result of the Coronavirus pandemic. The guidance should be read in conjunction with the policy but the meaning of the policy is not materially changed.**

The purpose of this document is to provide a quick and easy reference to those policies which have Covid-19 updates applicable to them. Both the original policy, and the Covid-19 amendment, can be accessed from this document.

Each policy name heading is linked to the associated policy on the Trust website. To view the policy, place your cursor over the heading name, press Ctrl and then click on the heading.

If you click on the policy name in the table of contents, you will be taken to the relevant section of this document.

**All other policies not referenced in this document remain unchanged.**

# [S02 SEND POLICY](https://www.dneat.org/app/uploads/sites/2/2020/08/S02-SEND-Policy-Nov19.pdf)

## Amended? Yes

1. Please refer to this link: [**Education, Health and Care (EHC) needs assessment requests (NCC)**](https://www.norfolk.gov.uk/children-and-families/send-local-offer/support-for-learning/education-health-and-care-ehc-plans/ehc-needs-assessment-and-plans/ehc-needs-assessment-requests)

2) Please see next page for NCC190004 Pupil Specific Needs Risk Assessment template

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**This exemplar risk assessment template will enable you to ensure that all the relevant information has been obtained in order to make an informed risk assessment on a case-by-case basis. This risk assessment template covers all children and young people considered to be vulnerable, including those with an EHCP, in line with the DfE definition** (<https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people> ) **We expect all Risk Assessments to have been completed by Friday 5th June 2020 and to be held by the setting where the pupil is on roll.**

If after completing the Risk Assessment you need further support, settings can email requests for support to: sendadviceandsupportrequests@norfolk.gov.uk or for support regarding health questions: nwccg.send@nhs.net

#

 **Introduction and guidance**

**Public Health England guidance details that:**

*A risk assessment may need to be undertaken, if it is deemed that a child may not be able to follow social distancing instructions, to determine what mitigations need to be put in place and whether, in rare circumstances, they should stay at home. For those children with a social worker, our expectation is that they should be in school unless a risk assessment concludes they will be safer at home. Other vulnerable groups who should undergo a risk assessment to determine the best place for them are those with EHCPs.*

**DfE guidance ‘Coronavirus (COVID-19); SEND risk assessment guidance’ (April 2020) states:**

<https://www.gov.uk/government/publications/coronavirus-covid-19-send-risk-assessment-guidance/coronavirus-covid-19-send-risk-assessment-guidance>

*We are asking local authorities to consider the needs of all children and young people with an education, health and care (EHC) plan, and make a risk assessment, consulting educational settings and parents or carers, to determine whether children and young people with SEND will be able to have their needs met at home, and be safer there than attending an educational setting. This assessment should incorporate the views of the child or young person. Local authorities and education settings should decide together who is best placed to undertake the risk assessment, noting that the duty to secure provision remains with the local authority.*

*Where the risk assessment determines a child or young person with an EHC plan will be safer at home, the Department for Education (DfE) recommends they stay at home. Where the risk assessment determines a child or young person with an EHC plan will be as safe or safer at an education setting, DfE recommends they attend the education setting.*

Norfolk County Council is committed to supporting settings to enable children and young people to have their needs met. Our commitment during the Coronavirus pandemic remains, however, circumstances are clearly different. We understand that settings are best placed to carry out risk assessments on their cohort of children and young people who have additional needs. Settings have important relationships with CYP and their families and know their current setting context well. Where there is Social Care involvement, we would expect that settings are engaging with key professionals, alongside parents/carers and, where appropriate, children and young people, to make these important decisions.

**Determining whether a risk assessment is necessary**

This risk assessment **must be completed** in conjunction with the **social worker**

If the pupil has an **underlying health condition** (p.6), then the setting **must liaise** with an appropriate medical professional or ask parents to provide information about their condition to determine the safest place for them (see appendix 2 of this risk assessment).

Yes

Does the pupil have a social worker (either section 47; section 17 child with disabilities or section 17 for other reasons)?

No

This risk assessment **must be completed**.

If the pupil has an **underlying health condition** (p.6), then the setting **must liaise** with an appropriate medical professional or ask parents to provide information about their condition to determine the safest place for them (see appendix 2 of this risk assessment).

Yes

Does the pupil have an EHCP?

No

Yes

Does the pupil have an underlying health condition?

No

Yes

Does the setting feel that the pupil falls into one or more of the following categories?

* Is at risk from self-harm including suicide
* Is known to use drugs or alcohol
* Is at risk from child sexual exploitation
* Is at risk from radicalisation
* Is at risk from county lines gangs
* Early Help is involved with the pupil and their family
* Does the setting’s DSL have any other concerns?

|  |  |
| --- | --- |
| Student’s Name: |  |
| Name of setting: |  |
| Class/Form/Year Group: |  |
| Date of Birth:  |  |
| Medical conditions: |  |
| External Agencies or Clinical Professionals actively involved  |  |

|  |  |
| --- | --- |
| Name of Person(s) with Parental Responsibility |  |
| Parent/Carer’s Home Tel. Number  |  |

|  |
| --- |
| **Part 1: Initial Screen** |
| **Level of Risk**: | Yes | No |
| **Social Care status of the child:** *please select from the drop-down menu* Choose an item. |
| Does the child access **respite care**?  |  |  |
| Does the child have **medical needs or disabilities**? |  |  |
| Does the child have an **EHCP**? |  |  |
| Is the child at risk from **self-harm**? |  |  |
| Is the child at risk from **suicide**? |  |  |
| Is the child known to use **drugs or alcohol**? |  |  |
| Is the child at risk from **child sexual exploitation**? |  |  |
| Is the child at risk from **radicalisation**? |  |  |
| Is the child at risk from targeting by **county lines gangs**? |  |  |
| Are there any other risk factors which would place the child at an increased risk if away from school? Is the DSL in the setting aware of anything else? |  |  |
| **Comments** |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Part 2a: The child or young person** | **N/A** | **Yes** | **No** |
| * is able to follow hygiene and social distancing practices at home. Are there any other known members of the household who are not able to follow social distancing practices?
 |  |  |  |
| * has health vulnerabilities and they are safer in the social distancing environment of their home
 |  |  |  |
| * has received a letter from the NHS to advise them that they are extremely vulnerable and require shielding in relation to COVID-19?
 |  |  |  |
| * is medically vulnerable and requires equipment or services that can be moved from their educational setting into their home. This may include physiotherapy equipment, sensory equipment, online sessions with different types of therapists, phone support for parents in delivering interventions and in-person services, where necessary
 |  |  |  |
| * additional health and care needs, such as personal care and mobility, can be met by the parents or carers, on a full-time basis for an extended period.
 |  |  |  |
| * additional health and care needs, such as personal care and mobility, can be met by the parents or carers family, but this would not be sustainable on a full-time basis for an extended period.
 |  |  |  |
| * is receiving personal care or healthcare at their school or college which cannot be replicated at home (this may include some pupils and students in residential settings) or provided by the parents or carers
 |  |  |  |
| * has a condition that prevents or inhibits self-regulation and whose behaviours that can be safely supported or managed by parents or carers at home, but this would not be sustainable on a full-time basis for an extended period.
 |  |  |  |
| * has a condition that prevents or inhibits self-regulation and whose behaviours cannot be safely supported or managed by parents or carers at home.
 |  |  |  |
| * would face other risks out of school or college as a result of their behaviour. For example, a child or young person becoming involved in dangerous behaviour or situations, requiring support from a social worker or to support a care placement at risk of breakdown.
 |  |  |  |
| * Will require essential close-contact in a school setting for example, personal care, behaviour management
 |  |  |  |
| * Has individual factors will impact on general ability to socially distance
 |  |  |  |
| * Has communication factors which impacts on reporting symptoms of COVID-19 to staff
 |  |  |  |
| * Has factors which will impact on ability to maintain good hygiene (handwashing and use of tissues)
 |  |  |  |
| * Has family members in the household who are shielding (if **yes**, the pupil should only attend the setting if stringent social distancing can be applied)
 |  |  |  |
| * Has an been identified as being at higher risk (but not in the clinically extremely vulnerable category) from Coronavirus: <https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk-from-coronavirus/whos-at-higher-risk-from-coronavirus/> **(see Appendix 2)**
 |  |  |  |
| * Has a Learning Disability and or/ASD with significant behaviours that challenge, he/she has been in CAMHS inpatient previously or could potentially deteriorate and require an inpatient admission (if **yes**, has a conversation with the family, LA and CCG taken place about whether the child should be added to the Dynamic Support Register?)

***If you require support with this, please email:******nwccg.send@nhs.net*** |  |  |  |
| **Where response to above questions falls into the red category, the setting will need to review specific arrangements and support plans prior to the pupil attending**. Please refer to Appendix 1 and Appendix 2 which provides additional details and considerations |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Part 2b: Education Health & Care (EHC) Plan** *where applicable* | Yes | No |
| The provision in the EHC Plan is being delivered at school? |  |  |
|  The provision in the EHC Plan is temporarily being delivered in a different way  |  |  |
| If **yes**, please provide an outline of the provision being delivered (e.g. resources to the home or online learning): |
| There are elements of the provision in the EHC Plan that are not being delivered and have a significant impact on meeting the needs of the child or young person If **yes**, please contact sendadviceandsupportrequests@norfolk.gov.uk for further advice |  |  |
| Has the parent/carer agreed to the provision currently being provided? |  |  |
| If **yes**, please provide specific details and list any actions taken to secure this provision: |
| **Comments**  |

|  |
| --- |
| **Part 3: The family/current home setting** |
| What are the family’s or current home setting’s views based on Part 1 of this Assessment?Consider: do the CYP’s needs/conditions impact on family life? Are the family usually in receipt of short breaks or respite care which has paused due to current conditions? Would the CYP and family benefit from either a part-time or full-time placement in school? |
| Comments and conclusions**The CYP would be safer in the education provision full time/The CYP would be safer having a part-time education provision/The CYP would be safer at home***If discussion with the family/current home setting would suggest that the CYP would be safer in the education setting, would this be 5 days per week, or would it be part-time in order to fill any gaps in short breaks/respite* |

|  |
| --- |
| **Part 4: Social Worker/other professional comments** *where applicable* |
| What are the social worker’s views based on Part 1 and 2 of this Assessment? *If a case management summary has been completed, please reference it here:* |  |
| **Comments****The CYP would be safer in the education provision full time/The CYP would be safer having a part-time education provision/The CYP would be safer at home***If discussion with the family/current home setting would suggest that the CYP would be safer in the education setting, would this be 5 days per week, or would it be part-time in order to fill any gaps in short breaks/respite* |  |

|  |  |
| --- | --- |
| **Part 5: Conclusions** |  |
| **The CYP will be safer at home and can have their health and care needs met by parents and carers** |  |
| **The CYP will be safer at home and can have their health and care needs met by parents and carers at the current time but this will require reviewing with the frequency specified below** |  |
| **The CYP will be safer at home and can have their health and care needs met by parents and carers; however, based on the risk assessment the family would benefit from respite meaning the CYP will be in school on a full- or part-time basis as detailed below** |  |
| **The CYP will be safer in school due to either their health/care needs or in terms of additional risks. The nature of the placement deemed appropriate (full-time/part-time) is detailed below** |  |

|  |  |
| --- | --- |
| Form completed by:  |  |
| Date Form completed: |  |
| Information regarding current family information discussed with (family member name/social worker) |  |
| Frequency of review |  |
| CYP to attend full time/part-time |  |
| Form scrutiny and overview – SLT |  |

**Appendix 1**

## Examples of where increased supportive actions may be required:

* + Where pupils cannot follow strict hygiene practices or social distancing instructions
	+ Pupils display behaviours are challenging to manage in the current context, such as spitting uncontrollably
	+ Pupils may be less able to report symptoms
	+ The impact on the pupil due to unfamiliar or less familiar staff supporting them and routines being inconsistent and different to usual school routines

## Suggested measures

Where pupils are less able to report symptoms consider changes from being their usual self; consider also their usual responses to situations, which may be a sign of being unwell such as:

* + Increased tiredness
	+ Loss of appetite
	+ Sweating
	+ Behaviours that challenge;
	+ Laughing or crying;
	+ Trying to hurt themselves;
	+ Becoming withdrawn or quiet
	+ Use preferred methods of communication available such as signing and picture cues
	+ Where you identify that symptoms may not be obvious, consider temperature assessments, these may assist to establish symptoms where a pupil may be less able to report them (≥37.8°C is considered a fever).
	+ Increase the support provided to pupils to increase the frequency and thoroughness of effective handwashing
	+ Put in place safe routines for access to toilets, hand-washing, break and lunch times
	+ Use simple language to explain social distancing and reiterate and reinforce key messages using teaching resources to aid understanding

**Appendix 2**

There are some pupils for whom schools and settings will want to seek clarification or advice from a health practitioner regarding attendance at school and the risks this might or might not pose. In order to be able to confidently advise parents/carers about attendance at the educational setting, the health practitioner will need to be currently and regularly involved in monitoring the child or young person’s health condition,

**Sample text to send to parents/carers and clinicians is below.**

**Attendance at School and COVID-19**

We are ensuring that any child who is **not** in the extremely vulnerable group but has any of the specified health conditions that are detailed in this letter can safely attend school, following the advice from Public Health England.

If you are the legal parent/guardian, would you please complete the form that is attached to this letter and return it to xxxx

**Pupils who are at increased risk**

We will need more information about the following conditions as detailed in this letter:

**People at high risk from coronavirus include people who:**

* are pregnant
* have a lung condition that's not severe (such as asthma, or bronchitis)
* have heart disease (such as heart failure)
* have diabetes
* have chronic kidney disease
* have liver disease (such as hepatitis)
* have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy)
* have a condition that means they have a high risk of getting infections
* are taking medicine that can affect the immune system (such as low doses of steroids)
* are very obese (a BMI of 40 or above)

Please complete the form where your child falls into the high risk group, you will need to provide details about the health condition (if you are unsure, consider a request for a medical summary. You can also request repeat medication from your surgery. This and can be accessed online through ‘my health records’ and can be downloaded directly: <https://www.myhealthrecord.gov.au/for-you-your-family/howtos/log-in>

If you cannot access information regarding these conditions, we will need you to obtain advice from the health professional who is currently and regularly involved in monitoring your child’s health.

**Setting: please add information here about your data protection policy**

**COVID-19 Clinician form for pupils who are at an increased risk**

**Your child’s details**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Date of birth |  |

**Your details and consent**

|  |
| --- |
| I have completed this form and consent to the health professional completing the information below and returning this information to [insert setting name and return details].  |
| Name  |  |
| Address |  |
| Date of birth |  |
| Relationship to the person above |  |
| Signature and date |  |

**Please send this form to your treating clinician.**

**Clinician assessment**

Norfolk County Council have implemented the relevant Public Health England guidance in our education settings and the Health, Safety and Well-Being Team regularly review and update these arrangements in order to ensure that current advice is followed. Would you please tick the relevant section below in relation to attendance at [insert setting name].

|  |
| --- |
| I confirm that the above name child: |
| Can attend school despite their underlying condition which is in the high risk group |  |
| Cannot attend school because of their underlying condition which is in the high risk group |  |
|  |
| Name of health professional |  |
| Job title |  |
| Practice address |  |
| Date |  |

Please return this form by email to xxxxx

# [S05 TRUSTWIDE HEALTH AND SAFETY POLICY](https://www.dneat.org/app/uploads/sites/2/2020/09/S05Trust-Wide-Health-Safety-Policy-Sep20.pdf)

## Amended? Yes

Please click this link: [**RIDDOR reporting of COVID-19**](https://www.hse.gov.uk/news/riddor-reporting-coronavirus.htm)

Please click this link: [**Protect vulnerable workers during the coronavirus (COVID-19) pandemic**](https://www.hse.gov.uk/coronavirus/working-safely/protect-people.htm)

# [S16 SAFEGUARDING POLICY](https://www.dneat.org/app/uploads/sites/2/2021/01/S16-Trust-Wide-Safeguarding-Policy-Sep20-update-Jan-21.pdf)

## Amended? Yes

Appendix 9 was updated in January 2021 to include information during December 2020 and onwards lockdown.