

Covid-19 Supplementary Risk Assessment

Class Music – Singing in Bubbles

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Version:	6 <i>This document will be updated in line with DfE and Government guidance. Please visit www.bradfordmusiconline.co.uk regularly to ensure that you have the most up to date risk assessment.</i>		
Date of assessment:	28/4/21	Review date (max 1 yr):	31/7/2020

Description of activity

Whole class and small group singing and where singing is a part of another activity. If specific to a group, school or situation, provide details such as where it takes place (site, space, room) numbers involved, equipment and who leads the activity.

References to related risk assessments

If there is a pre-existing risk assessment for this activity, refer to it here.

Existing control measures

These are the things you already do, or are inherent in the activity, that reduce the risks.

	Hazard	Who is at risk?	Control measure(s)	Who is responsible?
1	Understanding school adaptations and Risk Assessment to COVID-19	MAS Staff	Initial meeting with MAS staff member and school SLT member to run through the school risk assessment and practicalities. Identify any higher risk children and what PPE and additional risk assessments are associated.	MAS Staff
2	Airborne transmission	Everyone	Staff must wear face shield. Pupils take up the maximum space possible and in no circumstance, less than 4m ² per pupil (2m in any direction) or adult. Liaise with class teacher to ensure table set up allows for adequate spacing wherever possible. Group size must not exceed 15 pupils and must be positioned either side by side or back to back	MAS Staff



3	Airborne transmission	MAS Staff	Teacher to be at least 2m from the nearest pupil or adult. Liaise with class teacher to ensure table set up allows for adequate spacing wherever possible. Ensure that movement around the classroom is minimal and flag immediately with school where this is not possible. PPE should be worn if 2m cannot be achieved.	MAS Staff
4	Airborne transmission	Everyone	Discourage loud singing. Ensure backing tracks are at a suitable volume to minimise an excess in volume. <i>Note: discouraging loud singing in favour of quality of sound in quiet singing would generate fewer bioaerosols.</i> <i>Note: extremes of diction (particularly plosives) generate higher volumes of bioaerosols, so maybe try singing only on vowels sometimes.</i>	MAS Staff
4	Airborne transmission	Everyone	Ventilation is key. Open windows before the start of the session or sing outdoors. If windows are closed on entry, ensure that they are opened.	MAS Staff
5	Surface transmission via printed music	Pupils	Resources mainly taught by ear. If required, words are projected onto screen but not printed or distributed.	MAS Staff
6	Surface transmission via equipment used for playing backing tracks or accompanying	MAS Staff	Clean PC, IT equipment or CD player for backing track or piano/keyboard. Refer to Music Mark's guidance for advice on cleaning equipment. Do not assume that this has been done for you prior to arrival	MAS Staff
7	Surface transmission via behaviour management and practice diaries	MAS Staff	MAS Staff to use in school rewards and sanctions only. Do not issue stickers or certificates. Practice diaries not to be used (use Google classroom or online alternative)	MAS Staff
8	Airborne Transmission	Everyone	Singing should not take place in larger groups (e.g. choirs, assemblies) unless significant natural airflow and social distancing can be maintained.	MAS Staff

Initial risk rating

How likely is the activity to result in actual harm (1-5)?	3
How severe would the consequences be (1-5)?	3
Risk rating (likelihood x severity)	9

Likelihood	more	5					
		4					
		3					
		2					
	less	1					
			1	2	3	4	5
			better		worse		
			Severity				

Additional control measures

These are new measures identify to reduce the risk rating. It is usually easier (and it is perfectly acceptable) to reduce the likelihood of harm rather than the severity.

It is not necessary to implement additional control measures for every hazard identified. Prioritise the hazards you have identified and ensure that control measures are reasonable and proportionate.

	Hazard	Who is at risk?	Control measure(s)	Who is responsible?
1	Airborne transmission	Teacher	Face shield must be worn.	MAS staff
2	Airborne transmission (vulnerable teacher)	Teacher	Follow any additional arrangements made direct with the service manager (individual staff basis)	MAS staff
3	Airborne transmission (vulnerable pupils)	Pupil or pupils	Follow additional risk assessment advice provided by school. Initial conversation in school to identify any higher risk children and what PPE and additional risk assessments are associated.	MAS staff
4	A child develops symptoms of COVID-19 during session delivery, the staff member could be exposed to infection	Everyone	Risk assessment conducted by the school, following government guidelines. <ul style="list-style-type: none"> • Staff member will follow the MAS activity risk assessment and ensure face shield is worn. • Staff member will alert school staff as per risk assessment • Social distancing will have been observed where possible • Child will be isolated from group if symptomatic • Child will be sent for testing by school 	MAS Staff

			<ul style="list-style-type: none"> • Staff member will be informed of outcome of test • Staff member will isolate if child is positive and access COVID-19 testing <p>Staff to ensure timetable up to date and records all contacts with schools via Paritor on a daily basis. Where a child tests positive the staff member will isolate for 10 days from the date of contact and be referred for a test . If the staff member subsequently tests positive, all contacts will be informed by manager</p>	
5	A child develops symptoms of COVID-19 within 14 days of a staff member delivering a session within school, the staff member could have been exposed to infection	Everyone	<p>Risk assessment conducted by the school, following government guidelines.</p> <ul style="list-style-type: none"> • Staff member will follow the MAS activity risk assessment and ensure face shield is worn. • School will alert staff member by telephone and follow up email to staff member and identified manager <p>Staff to ensure timetable up to date and records all contacts with schools via Paritor on a daily basis. Where a child tests positive the staff member will isolate for 10 days from the date of contact and be referred for a test If the staff member subsequently tests positive, all contacts will be informed by manager</p>	MAS Staff
6	The staff member develops symptoms of COVID-19 during a session	Everyone	<p>Staff to remain at home if displaying one of the following symptoms:</p> <ul style="list-style-type: none"> • High temperature • Persistent cough • Loss of taste of smell <p>Staff to ensure timetable up to date and records all contacts with schools via Paritor on a daily basis</p>	MAS Staff

			<p>If symptoms develop during a session the staff member must leave the site immediately, informing an identified member of staff and manager</p> <p>The staff member must obtain a test and report the results to their manager and the identified senior member of staff in school</p> <p>If the staff member test positive for COVID-19, children who have been in contact will be requested to isolate for 10 days</p>	
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Residual Risk rating

How likely is the activity to result in actual harm (1-5)?	1
How severe would the consequences be (1-5)?	1
Risk rating (likelihood x severity)	2

Likelihood	more	5					
		4					
		3					
		2					
	less	1					
			1	2	3	4	5
			better		worse		
			Severity				

Risk rating:	1-6	Green	Monitor to ensure control measures are implemented consistently and that the rating remains valid.
	8-12	Amber	Try to identify additional controls to reduce the risk. Ensure that control measures are implemented consistently and look to improve by the next review.
	15-25	Red	Cease this activity until additional controls can be put in place to manage the risk.

Date communicated to staff/volunteers: _____

Signed: _____ **Date:** _____

Name: _____ **Position:** _____

Remember:

- This is a legal document: you must do (or ensure that people working for you do) what you say in it.
- Risk assessments must be reviewed at least annually or when there is an incident, i.e. in this case, if someone falls ill after taking part in the activity.
- For the purposes of Health & Safety, if you have not recorded it, you have not done it.

Singing in schools

Supplementary observations

Since Music Unlocked was published (five days before I write this!), more has appeared on the subject of singing. Most authoritative is a meta-analysis by Professor Martin Ashley for the Association of British Choral Directors ([paper here](#)). Ashley cites the overwhelming volume of studies from 1934 to the present day (literally, today) into aerosol propagation in closed environments and the sort of spaces in which singing typically occurs. The bluntest conclusion that can be drawn is that communal singing, as it was practised up until March 2020, is not safe while there is no vaccine for Covid-19. He pours cold water on suggestions in the press this week that singing may not be as dangerous as was thought:

An issue here would appear to be the dangers of scientists venturing a little beyond their normal sphere of work and hasty and superficial reading of papers by journalists.

In our advice to the education sector, Music Mark has taken account of these studies. Nevertheless, our advice is given in the context of the following circumstances and observations.

1. Almost all research has focussed on professional, university-level and a tiny number of amateur adult singers. While some year 11 and above pupils may approach these standards (and risk assessment will need to take account of these), in the main, most school singing happens in KS1 and KS2. Children in these age groups will have lower lung capacity and less strength in the diaphragm. They will not move as much air or project it as far.
2. Much of the research talks about typical choir rehearsals of two to 2½ hours and there is talk of reducing to a maximum of 90 minutes in some cases. In most classroom circumstances, time actually vocalising is unlikely to exceed maybe ten minutes.
3. Choirs usually have more members than the 15 plus a teacher permitted in classroom bubbles.
4. The social element of choir rehearsals was undoubtedly a factor in widely-reported cases of Covid-19 outbreaks in choirs in the US and throughout Europe. Typical behaviour included physical affection and often the sharing of food and drinks, prolonged proximity (singers are usually seated just inches from each other) and leaning in together to check markings or borrow pencils. Schools will routinely be discouraging and managing such behaviour.
5. Children will be spending upwards of 30 hours a week in their bubble. If they are not singing, they are all still breathing the same air, unless they are scrupulously social distancing (unlikely in KS1) and each breathing only out of their own open window (no, I don't think so either). There will be some additional risk to singing but whatever they would otherwise do is not risk-free.

It gives this semi-professional singer and experienced chorister no pleasure to say that formal choral singing is probably unsafe at this time. The only responsible advice is that the school choir cannot meet for now.

It is possible to teach music without singing (by focusing on music appreciation and music theory for example) but how long would it be reasonable to teach a foreign language without speaking it? For the reasons stated above, we are confident that teachers can include singing in their bubbles.