Coronavirus (COVID-19) Risk assessment

Date: May 2020 Review Date: September 2020 Red- High risk Yellow-medium risk Green-little to no risk

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| Focus | Area of consideration | Recommendation | Risk and level of risk |
| Children | Drop off | * Each family to be given staggered top off/pick up times, social distancing to be adhered to at all times
* Parents asked to stay in car until their allocated time slot
* If unable to stay in car, lines are to be marked on the floor for parents and children to wait on
* 1 parent/guardian to accompany child to and from setting to minimise number of people outside, the adult must be symptom free
* Trolley to be put outside of door for parents to place lunch and bags on.
* A member of staff is to collect the children at the door, no parents are to enter the building
* Only children who are symptom free or have completed the required isolation period attend the setting
* On arrival to pre-school, it is reasonable to ask if parents, children, or any member of their household have any symptoms of COVID-19 (high temperature or a persistent cough). If the answer is yes, they should not be allowed to leave their child at the setting. The children cannot return until a negative test result has been confirmed and agreed return with pre-school or current isolation guidance is followed.
* Children are to entre the setting and staff will take them to wash hands thoroughly, at regular intervals during the day, after coughing/sneezing and before eating.
* Encourage children to avoid touching their face, eyes, nose and mouth.
* All children coming to the setting should avoid all non-essential public transport travel, and outside of setting hours, following national guidelines for social interaction.
* Any child that has taken any form of paracetamol or ibuprofen will not be allowed into pre-school for 48 hours after symptoms have ended
* Any child who displays signs of a cold will not be allowed into pre-school until 48 hours after symptoms have ended
* Children taking time to settle after prolonged break and change in routine
 | * Parents are not permitted to enter the building
* Parent sticking to staggered time
* Families not sticking to social distancing
* Families not being truthful about household health
* Contamination from outside objects being brought into pre-school
* Staff having confidence to challenge families about health
* Hands getting washed thoroughly
* Children will continue to touch their face, hands, and mouth
* Families and staff not sticking to social distancing guidelines
* Families not saying if children have had medication
* Enough staff in to ensure children can adapt easier to routine changes
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|  | Social distancing | * Sessions to be organized into small groups or “bubbles” and should not mix during the week
* The “bubbles” are to be split up into different sessions during the week, staying with set members of staff
* Core routines should be adapted to be with in a safer distance, e.g. limit the amount of children at snack at one time
* Children should be staggered use of outside
* Return will be gradual, with priority given to school leavers and vulnerable learners
* Staff to social distance throughout the day as much as possible
 | * Parents need for children care will need to be juggled against ratio and “bubbles”
* Splitting sessions to fit around staff with a limited number of staff
* Staff mixing with different “bubble” and cross contamination
* Lack of space in the setting
* Restricting children’s use of areas and the effect on their experience at pre-school
* Parents taking responsibility to support setting with new advice and guidance for control measures
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|  | Play and learning | * Implement social distancing where possible:
1. Small groups
2. Limit number of children per session
3. Parents to leave site promptly after drop or and pick up
* Limit the equipment available to things that can be easily cleaned throughout the session
* Ensure children are washing hands regularly through session, as well as after coughing/sneezing and before eating
* Sensory play to be limited, activities limited to ones that can be easily cleaned
 | * The inability to effectively social distance with early years children
* Children not understanding that they can not free flow explore the setting as normal
* The change in routine may be distressing for some children
* How this is going to affect their development and experience, they will not be getting as an enriching experience from attending
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|  | Children’s wellbeing and education | * Children should be supported in developmentally appropriate ways to understand the steps they can take to keep themselves safe including regular hand washing and sneezing into a tissue.
* Children should be supported to understand the changes and challenges they may be encountering as a result of COVID-19
* Staff need to ensure they are aware of children’s attachments and their need for emotional support at this time
 | * Introduce theme on return about superhero germs
* Staff awareness of children’s needs and abilities
* Staff awareness of children needing more reassurance
* Following current guidelines on changes to the EYFS, relevant to COVID-19
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|  | Toileting, hand washing and cleaning | * Children should be supported to be as independent as possible
* Limit number of children in bathroom at one time
1. Limit number of children at sinks
2. Limit crowding to go to the toilet
3. Provide more soap dispensers to enable children to access soap at all times.
4. Encourage and support children to wash hand before and after eating
* If a child has an accident no other children are to enter the bathroom whist, they are getting dealt with
* One the children has been sorted out then the bathroom is to be thoroughly cleaned using standard cleaning products before being used by anyone else
* Staff to monitor children going to toilet
* Staff to clean toilets on a regular basis during the session
 | * Children unable to wait to go to the toilet
* Children used to free flow toilets and may want to go in and help others
* Ensuring the toilets are thoroughly cleaned
* Staff accompanying children to the toilet to unsure prompt cleaning
* Staff to support younger children to wash hands
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|  | Symptoms | * If a child begins to display a continuous cough or a high temperature, they will be sent home to isolate per the government guidelines
* A child awaiting collection should be separated from the other children, this may mean moving the other children to the garden until the child has been collected. The child should be moved somewhere where ventilation is accessible. If the child needs to go to the toilet during this time a staff member should go in and clean the bathroom before anyone else is to use it.
* Staff members will be provided with a bum bag including, gloves, apron, hand sanitiser, and a facemask. These are to be used at this time to protect staff.
* If a member of staff has helped with a child that has displayed symptoms they do not have to go home unless they show symptoms themselves. They should wash their hands thoroughly for 20 seconds.

If clinical advice is needed, the setting, staff, parent or guardian should go online to NHS 111, or call 111 if the internet is not accessible. | * Parents must agree to prompt collection if their child should come down with symptoms
* Parents to confirm emergency contact before returning to pre-school
* The close contact of a child with symptoms to other children and staff
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| Staff | Attendance | * Staff should only attend pre-school if they are symptom free, have completed the required isolation period or have achieved a negative test result
* Limiting the number of staff in pre-school at any one time. This is to be limited to only those required to care for the expected occupancy levels on any given day
* All staff coming to the setting should minimize social interactions as per the government guidelines
* Practitioners should receive clear communication regarding the role they play in the safe operating of the pre-school and all measures being taken to ensure the safety of staff and children
 | * Staff to be vigilant with their health and stay away if they are unwell
* Testing is available to staff and their household if they show symptoms
* All current government guidelines are to be followed and staff are to be kept up to date with any changes
* Staff are to receive a copy of this risk assessment and policy before return to pre-school. A copy will be filed at pre-school signed by all staff to say they have read and received a copy.
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| Food preparation, snack, and lunch | Snack and lunch | * Staff are to limit the number of children at snack at one time
* A limited number of children are to sit at each table for lunch
* Tables must be spread out
* Staff to handle food as little as possible
* Gloves to be worn when prepping/serving food
* Serving utensils provided for staff to serve snack
* Children are not to wash up their plates and cups at the present time
* Staff and children MUST wash hands before food preparation or eating
* Staff and children MUST wash their hands after eating
* Children and adults to be responsible for their own food waste
* Water bottles are to be labeled with child’s name, bottles are to be kept stored in kitchen and staff are to give to children at regular intervals during the session
* 1 member of staff in the kitchen at a time
 | * Regular hand washing
* Children and staff to put their own rubbish in bin, encouraging children to continue to recycle and compost their food
* Staff to wash plates and cups, using dishwasher if available on a hot wash
* Cleaning up waste after snack and lunch, staff are asked to use appropriate PPE to do so
* Children at different stages of independence. Some may need more help than others, appropriate PPE and hand washing is to take place whilst aiding the children
* Limited space, table will have to be adjusted to ensure enough space to spread children out
* Staff are to be vigilant of children touching others food
* Water bottles must be labeled
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| Workforce and parents | Physical distancing/grouping | * Wherever possible staff should remain in their set groups, unless illness occurs staff are to stick to their set days/groups
* Social distancing must be maintained during lunch breaks
* Staff members are to avoid physical contact with each other
* Where possible, meeting’s and training sessions should be conducted via virtual meeting
 | * Physical distancing is exceedingly difficult in the early-years, staff will be vigilant to minimize it
* Staff to engage in meetings via online video call
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|  | Training | * All staff are to receive appropriate instructions and training on infection control and risk assessment in which they will operate
 | * Staff to be signposted to online training courses for COVID-19 and infection control course on Noodle Now.
* Staff to be asked to carry out these course prior to return
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| Travel | Travel associated with pre-school | * Staff and families are asked to travel to pre-school using their own transport
 | * Guidance not being followed
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| PPE | Staff and children | * Wearing a facemask in school or education settings is not recommended. Face coverings may be beneficial for short periods indoors where there is a risk of close social contact with people you do not usually meet or where social distancing and other measures cannot be maintained for example pubic transport or shop. This does not apply to early years settings. It is recommended to keep on top of cleaning habbits, cleaning and hygiene are effective measures in controlling the spread of the virus
* Facemasks will be provided for if some staff feel safer wearing them if a child comes out with symptoms.
* The majority of staff in education settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others. PPE is only needed in a very small number of cases including:
* Children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way
* If a child, young person or other learner becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn
 | * Face coverings (or any form of medical mask where instructed to be used for specific clinical reasons) should not be worn in any circumstance by those who may not be able to handle them as directed (for example, young children, or those with special educational needs or disabilities) as it may inadvertently increase the risk of transmission.
* Disposable gloves, apron and fluid resistant mask as well as eye protection to be available to staff to use appropriately.
* Staff to be aware that PPE supplies are available and must be used appropriately i.e. one pair of gloves at a time. Facemasks and eye shields only when a child becomes unwell.
* PPE may not be avaiable to purchase or be in short supply. Should this happen and all reasonable attempts to get more fails then preschool should close.
* All PPE, personal and preschool, should be used according to current guidelines. The toughing of masks/shields should be treated in the same way as touching a face. Hands will require washing for at least 20 seconds.
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| Cleaning | Undertaking regular cleaning | * Cleaning and disinfecting frequently touched surfaces throughout the day including, tables, chairs, resources, equipment, other surfaces, door handles, light switches, toilets, taps, sinks
* Wear one pair of disposable gloves for cleaning and disposing of immediately after cleaning
* Staff to be given set areas to clean during the day and rota who cleans when
* Using a disposable cloth, first clean hard surfaces with warm soapy water, then disinfect these surfaces with the cleaning products you normally use
* Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning
* Regular cleaning of electronics including, tablets, phone, keyboard, remote control
* Waste from possible cases and cleaning of areas where possible cases have been, should be double bagged and put in a suitable and secure place, marked for storage until:
1. the individual tests negative; waste can then be put in with the normal waste until the individual tests positive or results not known; then store it for at least 72 hours and put in with the normal waste
 | * Cleaning not completed thoroughly
* Cleaning supplies not being available
* Toys that can not be cleaned to be but into storage
* Resources not in use to be shielded with covers and disinfected before use
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