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| **Coronavirus (COVID-19) Risk assessment**  |
| **Establishment:** **Great Expectations** | **Assessment by Susan Willis** | **Date: May 2020** |
| **Review Date: September 2020** |  **Red – high risk****Yellow – medium risk****Green - little or no risk** | **Draft 15/5/20** |



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| **Focus**  | **Area of consideration**  | **Recommendation**  | **Risks and level of risks** |
| Children | Attendance | * Families to be issued with staggered times to drop off/collect where possible. Social distancing to be always adhered to.
* One Parent/adult to drop and pick up the children. Parents are always to demonstrate social distancing. A member of staff will welcome children at the front door entrance to the building.
* Only children who are symptom free or have completed the required isolation period attend the setting.
* On arrival, it is reasonable to ask if parents, children, or any member of the household have any of the 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 child cannot return until a negative test result has been confirmed.
* No toys, teddys or blankets (or similar) to be brought in from home.
* Children who require dummies, parents will be asked to bring in their own from home with an attachable cord to avoid contamination.
* Children to enter the setting and staff take them to wash hands thoroughly on arrival at the setting, when changing rooms, areas 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, follow national guidelines for social interaction.
* Any child who has been told to shield or who is clinically vulnerable or live in a household with someone who has been advised to shield or is clinically vulnerable cannot attend the setting.
* Any child who has taken any form of paracetamol or ibuprofen will not be allowed into nursery for 48hours after symptoms have ended.
* Any child who displays signs of a cold will not be allowed in nursery until 48hours after symptoms have ended and a negative test result.
* Children taking time to settle after prolonged break and change in routine.
* Only parents who are symptom free and or have completed the required isolation periods will be able to drop off or collect their child.
* Aim to limit drop off and pick up to 1 adult per family and stagger the timings where possible.
* Consider allowing parents to enter the Nursery for the purpose of settling n sessions if not doing so would cause a child distress. All measures should be taken to minimise contact between the parent and other children and staff members.
* Pushchairs to be stored in the pram store by members of staff collecting the children, ensuring gloves are worn.
 | * PARENTS ARE NOT PERMITTED TO ENTER THE BUILDING.
* Families will not stick to staggered times or use good time management
* Families will not stick to social distancing
* Families will not be truthful about household health
* Children will want toys/teddies/blankets from home, raising risk of contamination
* Only 1 adult per family to drop off/collect, limit siblings that come with them where possible.
* Staff will not enquire families about health
* Hands will not be washed thoroughly
* Children will touch face, hands, mouth
* Non-essential travel and social interaction guidelines not followed by staff and families
* Families not telling us children have had medication
* Enough staff in to ensure children can adapt easier to routine changes
* Staff not wearing gloves to receive pushchairs on collection of the children.
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| Physical distancing/ grouping  | * Childrens sessions will be organised into small groups of attendance, wherever possible these small groups or “bubbles” should not mix during the week.
* Care routines including provision of snacks should be within the space allocated to each “bubble” wherever possible.
* The use of communal internal spaces should be restricted as much as possible and used by each bubble and cleaned afterwards.
* Outdoor spaces should be used by different “bubbles” at different times of the day.
* Communal equipment to be cleaned after each bubble group for next group to use safely.
* Sleeping areas to be distanced and cots moved 2m apart where possible.
* Beds to be cleaned after each sleep with disinfectant.
* Windows open when possible for ventilation
 | * Parents need for childcare, to be able to return to work, will need to be juggled against ratios and “bubbles”.
* Staff mixing with different “bubbles” and cross contamination.
* space to have multiple bubbles
* Staff do not clean the equipment after each bubble group.
* Sleeping areas to consider due to the number of children in any given room. Staff to spread children out using the vast area of the nursery layout.
* Windows closed due to cold periods
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| Play and Learning | * Implement social distancing where possible:
1. Small groups
2. Parents to leave the site promptly after dropping off children.
* Minimise the resources available to those that can be cleaned effectively.
* Ensure children wash hands regularly, throughout the day, as well as before eating, after coughing or sneezing.
* Tissue stations with bins that are emptied throughout the day, ‘catch it, bin it, kill it’.
 | * Social distancing is virtually impossible with early years children.
* Parents will gather in social groups outside premises.
* Children will not understand they cannot explore the setting (free flow) or self- select toys and resources.
* Staff to ensure washing of children’s hands.
* Tissues that have been used by children go into areas and not bins provided.
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| Childrens 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 to be in bubbles with friends and adults they are familiar with.
* Children should be supported to understand the changes and challenges they may be encountering because of COVID-19 and staff need to ensure they are aware of children’s attachments and their need for emotional support at this time.
* Children’s needs will be met such as a cuddle or first aid or any other support by their supporting adult and bubble peers.
 | * Tissue stations
* Staff awareness of childrens needs and abilities
* Staff awareness of children needing more reassurance
* Follow current guidance on changes to EYFS, relevant to Covid 19 response.
* Children being moved into other bubbles due to reduced number of children and staff
* Staff not following guidelines following close contact.
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| Toileting and cleaning up of accidents. | * Children should be supported to do as much for themselves as possible.
* Limit number of children using sinks, queue to be in cloakroom or classroom to allow for more space. Bubble groups to use the bathroom area where possible and cleaned after by staff at each visit.
* Children should not attend if unwell.
* If an accident happens whilst it is dealt with no one else should use the bathroom.
* Once the child has been sorted out then the bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
 | * Children struggle to wait their turn.
* Children use to free flow with toilets, they may try to help others
* Not being cleaned properly
* Children must be accompanied when using the toilet to ensure prompt cleaning and limit contact between children in bathroom
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| If a child starts displaying symptoms. | * If a child begins displaying a continuous cough or a high temperature, they should be sent home to isolate per the guidelines.
* A child awaiting collection should be moved, if possible and appropriate, to a room where they can be isolated behind a closed door. If it is not possible to isolate them move them to an area which is at least 2 metres away from other people. A window should be opened for ventilation.

If they need to go to the bathroom while waiting to be collected, the bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.If a member of staff has helped someone who displayed symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell, wear a face mask and gloves until child/adult has been collected or left the nursery setting. If clinical advice is needed, the setting staff, parent or guardian should go online to NHS 111 (or call 111 if they don’t have internet access) | * Parents must agree to prompt collection within the new contract, before child starts back a nursery.

If a parent cannot agree to prompt pick up, then the child cannot return to nursery * Parents to confirm emergency contact details before child returns, to ensure we have correct telephone numbers.
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| Workforce | Attendance | * Staff should only attend the nursery if they are symptom free, have completed the required isolation period or achieved a negative test result.
* Staff that live with critically vulnerable family members to remain at home and follow government guidelines.
* Risk assessing with regular health questionnaires for returning staff.
* Pregnant staff to remain at home and follow government guidelines.
* Consideration should be given to limiting the number of staff in the nursery at any one time to only those required to care for the expected occupancy levels on any given day.
* All staff coming to the setting should avoid all non-essential public transport travel, (to obtain a nursery mask if they need one) whenever possible and outside of setting hours, should minimise social interactions, as per the national guidelines.
* Practitioners should receive clear communication regarding the role they play in safe operating procedure and all measures being taken to ensure the safety of the children and themselves.
* Staff to change into uniform once in the setting and remove before leaving to avoid family members with any contamination of clothes with the virus.
 | * Staff to be vigilant on health and stay away if unwell.
* Testing is avaiable to all key workers and their households.
* Current government guidance to be followed.
* Practitioners to receive a copy of policy and risk assessment documents before return. A copy will be retained at nursery signed by all staff to say that they have received and read a copy.
* Staff going home in unseen contamination on uniform.
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| Food Preparation, snack and lunches |  | * Be mindful of the number of bubbles in food area. 1 bubble at a time.
* 4 people per table.
* spread tables out.
* Staff and Children MUST wash hands before prep or eating,
* Staff and children MUST wash hands after eating.
* Adults to handle eaten food as little as possible.
* Children and adults to be responsible for their own food rubbish.
* Staff members not to enter the kitchen area unless invited or is empty.
* Staff to stagger lunches to maintain social distance guidelines. Use all available areas not used to accommodate.
* In the case of food supply is interrupted, procedures must be implemented to ensure the appropriate food alternatives are sourced and normal food hygiene processes are followed. Staff members to attend local supermarket to obtain food if deliveries are unavailable ensuring they follow social distance rules.
 | * Regular hand washing before prep and eating.
* Regular hand washing after eating.
* Children and staff to put their own rubbish in the bin.
* Adult only to load Dishwasher which is to be used on hot setting not eco.
* If children are very messy, staff need to use appropriate PPE to clean.
* Limited space for eating. Children at various stages of being self-sufficient. Several children struggle with basic table manners and cough, spit everywhere.
* Staff going to supermarket for food supplies when deliveries cannot be obtained.

Staff lunch breaks. |
| Laundry | Staff and setting | * Bedding and other laundry items to be washed at higher temperatures following NHS guidelines.
* Laundry must be placed into the washing machine using gloves due to
* Staff must wash their uniforms separate to other family members clothing.
* Towels used for individual children should not be shared.
 | * Staff not wearing gloves when doing the laundry
* Sharing of towels by children by mistake
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| Workforce and Parents | Physical distancing/grouping | * Wherever possible, staff should remain with the small group of children, the “bubble” of children who they are allocated to and not meet other groups.
* Social distancing must be maintained during breaks.
* Staff members should avoid physical contact with each other including handshakes, hugs etc.
* Where possible, meetings and training sessions should be conducted through virtual conferencing if social distance cannot be maintained.
 | * Physical distancing is impossible in early years, even though staff can be vigilant and minimise it.
* Staff to engage with virtual conferencing via zoom. This can be done via app on phone/tablet or laptop.
* Staff using physical contact such as hugs when reunited as a team.
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| Training  | * All staff members must receive appropriate instruction and training on infection control and the standard operation procedure and risk assessments within which they will be operate.
 | * Training avaiable online for infection control and covid 19. Staff have been given the link to complete and print off certificate.
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| Physical distancing | * Only parents who are symptom free and or have completed the required isolation periods will be able to drop off or collect their child.
* Aim to limit drop off and pick up to 1 adult per family and stagger the timings where possible. Parents are to leave promptly and move away from the nursery boundaries whilst maintaining social distancing guidelines.
* Consider allowing parents to enter the Nursery for the purpose of settling in sessions if not doing so would cause a child distress. All measures should be taken to minimise contact between the parent and other children and staff members.
 | * Parents not following social distancing guidelines will be asked to take leave immediately. If they do not follow the request, they will be asked to take their child home. At this point the family will have current guidelines, policy and social distancing measures reinforced to them
* Further breaches may result in loss of child’s place at nursery.
* Allowing parents to enter premises can put staff and children at risk.
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| Parents, andVisitors  | Communication  | * Parents should receive clear communication regarding the role they play in safe operating procedure and all measures being taken to ensure the safety of their children and themselves.
* Management to clearly and promptly keep all staff informed of changes and details of wages, policies etc.
 | * Policy and contract to be sent out to each family before return
* All families to return a signed contract before return
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| Visits | * Attendance to the setting should be restricted to children and staff as far as practically possible and visitors should not be permitted to the nursery unless essential (e.g. essential building maintenance).
* Where essential visits are required these should be made outside of the usual Nursery ours where possible.
* Staff from our adjoining learning centre will follow our strict guidelines and procedures.
* New family show rounds should be done outside of nursery hours where possible such as weekends.
* Milk to be collected at the door delivered by milkman. Staff to wear gloves.
* Asda deliveries to be collected by staff wearing gloves
 | * Unannounced visitors not to be admitted
* Visitors by appointment only
* Staff from adjoining establishment following our guidelines.
* Show arounds out of normal working nursery hours.
* Milk collection staff do not wear gloves
* Asda collection staff do not wear gloves
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| Travel | Travel associated with setting operations | * Wherever possible staff and parents should travel to the Nursery using their own transport.

If public transport is necessary, current guidance on the use of public transport must be followed. Staff using public transport can obtain a mask from nursery to travel safely. | * Guidance not followed
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| PPE | Both Workforce and children  | * Wearing a face covering or face mask in schools or other 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 and where social distancing and other measures cannot be maintained, for example on public transport or in some shops. This does not apply to schools or other education settings. Schools and other education or childcare settings should therefore not require staff, children and learners to wear face coverings. Changing habits, cleaning and hygiene are effective measures in controlling the spread of the virus.
* Most 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 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 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 become unwell.
* PPE may not be avaiable to purchase or be in short supply once nursery has run out.
* All PPE, personal and nursery, 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  | Undertake regular cleaning  | * Clean AND disinfect frequently touched surfaces throughout the day.
* This includes tables, chairs, door pads and intercom, resources, equipment, doorknobs, light switches, countertops, handles, toilets, taps, sinks, and outdoor equipment following each bubble usage.
* Wear one pair of disposable gloves for cleaning and dispose of immediately after cleaning.
* 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.
 | * Cleaning not completed thoroughly
* Cleaning supplies not available
* Cleaning implemented before closure to be continued.
* Soft toys and furnishings to be removed from setting, where possible.
* Resources not in use should be behind plastic covers and disinfected before use.
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| Cleaning REVIEWS: | Cleaning of electronics | * Regularly clean electronics, such as tablets, touch screens, keyboards, telephones and remote controls throughout the day.
 | * Staff difficult to manage such as answering the intercom may forget to clean in times of collections.
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|  | Disposal of potentially contaminated waste | * 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
* the individual tests positive or results not known; then store it for at least 72 hours and put in with the normal waste
 | * Storage bin area to have a bin for such issue.
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| REVIEWED BY: | COMMENTS: | Any additions needed: |