

Risk Assessment Form

This risk assessment has been written to mitigate the risk from Covid 19 to determine the control measures that can be put in place and should be used alongside any other existing risk assessments already in place.

Task / Activity Covered by the assessment	Out of School Clubs during Coronavirus Outbreak <i>And child attending more than one childcare setting or member of staff is working in an additional workplace.</i>		National Covid 19 Alert Tool	Likelihood (L)	X	Impact (I)	
			1	Almost Impossible	1	Insignificant (minor injury, no time off)	
Setting	Honeycroft		2	Unlikely	2	Minor (non-permanent injury, up to 7 days off)	
Date of Assessment	28/08/20	Date Assessment to be reviewed	As required	3	Possible	3	Moderate ((injury causing more than 7 days off)
Person Completing	N Silsby		4 Current Level	Likely	4	Major ((death or serious injury)	
Staff involved in assessment			5	Almost Certain	5	Catastrophic (multiple deaths)	
				Low = 1-3	Moderate = 4-7	Significant = 8-14	High = 15-25

To calculate Risk Rating (R): assess the likelihood (L) of an accident occurring against the **most** likely impact (I) the accident might have, taking into account the control measures already in place. $L \times I = R$

What are the significant, foreseeable, hazards? (the dangers that can cause harm)	Who is at Risk?	Current control measures (What is already in place/done)	Risk Rating			What additional controls will be put in place to reduce the risk further?	Revised Risk Rating			Sign as done	
			L	I	R		L	I	R		
1. TRANSMISSION OF VIRUS											
1.1	Attendance of Children and Staff	Infection of staff, children and families	<ul style="list-style-type: none"> • All adults know not to enter the setting if they are displaying any symptoms of coronavirus & that children are not to be brought to setting if they are displaying any symptoms of coronavirus • Information given to all parents/carers prior to attending • Government guidance is followed and updates shared with staff as required • Parents and carers closely monitor children for signs of Covid-19 symptoms in line with guidance • Communicate to staff and parents/carers that they need to be ready and willing to: <ul style="list-style-type: none"> ○ book a test if they or their child is displaying symptoms of coronavirus and must not attend the setting if they have symptoms. All children can be tested, including children under 5 ○ Provide details of anyone they have been in close contact with if test positive for coronavirus or if asked by NHS Test & Track ○ Self-isolate if they have been in close contact with someone who develops coronavirus symptoms or someone who tests positive for coronavirus ○ Inform the setting immediately of the results of a test ○ If the result is positive, the setting will contact the local health protection team to carry out a risk assessment to confirm who has been in 	3	3	M	<p>All staff and children's temperatures taken and recorded at the start of each session</p> <p>Staff are limited to the minimum needed to look after children by agreeing a rota of staff based on predicted numbers</p> <p>A short induction process for staff returning to the setting covering all changes will take place</p>	2	3	M	NS

			<p>close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate</p> <ul style="list-style-type: none"> ○ Any confirmed cases will also be reported to Ofsted 								
1.2	Protecting shielded and clinically vulnerable adults and children	Infection of staff, children and families	<ul style="list-style-type: none"> • Shielded & clinically vulnerable children and adults should follow government advice. From 1st August, shielding advice for all adults and children will pause, subject to a continued decline in the rates of community transmission of Covid-19. Therefore, any children on the shielded list can return to settings, as can those who have family members who are shielding • If rates of disease rise locally, children (or family members) may still be advised to shield during the period where rates remain high and therefore may be temporarily absent • Some children no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to the settings, you can find more advice from Royal College of Paediatrics and Child Health • If people with possible risk factors are concerned, settings discuss their concerns and explain the measures the setting is putting in place to reduce risks. Setting leaders should try as far as practically possible to accommodate additional measures. 	3	4	M	<p>Under exceptional domestic circumstances, prior to 1st August, (i.e. where remaining at home throughout the day creates an additional and higher risk), shielded/ extremely vulnerable staff may return to work where an individual risk assessment has been undertaken to assess and consider their own personal circumstances and to identify the risks and necessary controls to allow that member of staff to return to work. It may be necessary for those staff to be deployed in another role.</p> <p>Staff are offered an individual risk assessment before returning to work.</p>	2	4	M	NS

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1.3	Physical distancing and grouping	Infection of staff and children	<ul style="list-style-type: none"> • Children and adults are grouped and stay within social distancing guidance throughout the session. Wherever possible groups are not mixed during the day or on subsequent days • Children will be kept in small consistent groups of no more than 15 with at least one staff member, or with more staff members to meet relevant ratio requirements • Adult: child ratios are maintained • Attendance patterns have been reviewed to allow for consistency of groups of children mixing with no more than 14 other children throughout the week • Where it is not possible to group children in the same bubbles as they are in during the school day, children are kept in consistent groups, as far as possible, which are frequently reviewed to minimise the amount of 'mixing' (that is, the number of different people each child comes into contact with). • Up-to-date records of the children attending each session are kept for at least 21 days, including the school they attend and the specific groups and members of staff they have been assigned • The government will keep group sizes under review • Parents are aware of all measures in place ahead of attending including grouping requirements • Groups and staff stay two metres apart from other 				The environment has been arranged to accommodate groupings				

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1.4	Social distancing and grouping	Infection of staff and children	<ul style="list-style-type: none"> All areas are thoroughly cleaned at the end of the day Contact and mixing between children and adults is minimised by amending the environment and routines Each group will have time spent outdoors – wherever possible Separate toilet is allocated for each group 								

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1.5	Health and hygiene	Infection of staff and children	<ul style="list-style-type: none"> All adults and children regularly clean their hands according to guidance on hand cleaning Handwashing facilities are available. Where a sink is not nearby an appropriate hand sanitiser is provided for staff and bowls of water and hand soap for children All adults and children clean their hands on arrival at the setting, before and after eating, before and after using the garden and encouraged to after sneezing or coughing Help is given to children who have trouble cleaning hands independently Good hygiene promoted 'catch it, bin it, kill it' approach shared: children reminded not to put hands/fingers in mouth/nose/eyes Lidded bins for tissues provided in each grouped area and are emptied at the end of each day Paper towels are used in bathroom area and bins emptied regularly 	3	3	M		2	3	M	NS

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1.6	Cleaning	Infection of staff and children	<ul style="list-style-type: none"> Surfaces that children touch, such as toys, books, tables, chairs, doors, sinks, toilets, are cleaned more regularly than normal using standard detergents Sharing of toys, resources and equipment is reduced as much as possible by remaining in groups. And any shared items and surfaces are cleaned and disinfected frequently Touch points of outside equipment is wiped down between groups of children Multiple groups will not use items or areas simultaneously No items can be brought in from home Soft toys & soft furnishings have been removed from the space Malleable materials are supervised closely on a small scale and are not shared between groups Hands are cleaned thoroughly before and after use of malleable materials 	3	3	M	Staff belongings have been allocated an individual non-shared area	2	3	M	NS

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1.7	PPE and cleaning supplies	Risk of infection if supplies run out	<ul style="list-style-type: none"> An adequate supply of essential supplies is available at all times Each area has its own 'cleaning zone; with access to all required items An 'isolation' pack is fully stocked and kept available to use should a child develop symptoms throughout the session and be required to self-isolate until a parent can pick them up 	2	3	M	Supplies are monitored for PPE and cleaning equipment to ensure that a supply of stock is available at all times	2	3	M	NS

							Supplies received from the LA regarding non-general use PPE				
1.8	Arrivals and departures	Infection of staff, children and families	<ul style="list-style-type: none"> • Children are collected from their classes and walked back to site using consistent member of staff and groupings following the government guidelines which allow up to six people from different households to meet outdoors • All adults and children clean their hands-on arrival at the setting and have their temperature taken • Parent /carer pick-up arrangements have been organised to minimise adult to adult contact by marking two meter spaces for social-distance waiting • Only one adult is asked to bring the child for drop off / pick up • Parents know that they cannot gather at entrance or enter the site (unless they have a pre-arranged appointment, which should be conducted safely) 	2	3	m	Staggered session end times help to minimise parent/carers gathering near the entrance	2	3	m	NS

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1.9	Travel	Infection of staff and families	<ul style="list-style-type: none"> Staff walk children back to the setting from their retrospective schools Parents and staff are made aware of recommendations on transport to and from centre to reduce unnecessary travel on public transport where possible and avoid peak times 	2	3	M		2	3	M	NS
1.10	Visitors	Infection of staff, children and visitor	<ul style="list-style-type: none"> No non-essential visitors can access the centre Essential delivery workers and suppliers will not enter the centre Food deliveries will be drop-off at door All essential maintenance and building work is confined to lower building only or out of hours If contractors must visit the premises they are informed of health and safety procedures. Any items used, e.g. pen to sign in, must be cleaned thoroughly 	2	3	M		2	3	m	NS
1.11	Sickness at the setting	Infection of staff and children	<p>Covid-19 sickness procedure.</p> <p>Adult:</p> <ul style="list-style-type: none"> If a member of staff falls ill whilst at the centre they will return home and arrange a test <p>Child:</p> <p>A procedure is in place to be followed if a child begins to show symptoms of coronavirus. This includes:</p> <ul style="list-style-type: none"> The child will be moved to a designated 'safe zone' One adult will stay with the child using the 'isolation pack' available including required PPE The child will leave the building with parent/ care via the shortest route The child will not be able to return to the setting until 10 days or until a negative test result has been obtained Additional cleaning will be carried out if there is a suspected/confirmed case of Covid-19, following government advice 	4	3	M	<p>An isolation kit is available at all time in the agreed 'safe zone'</p> <p>A duplicate PPE kit, including a face mask is available and accessible</p> <p>'safe zone' will receive a deep clean by staff wearing PPE</p> <p>If a member of staff or child attending the setting tests positive for coronavirus, reporting the case to</p>	3	3	M	NS

			<ul style="list-style-type: none"> • If the effected child tests positive for Covid-19 other children in the same group and staff member will be contacted and asked to self-isolate or get tested. They will not be able to return to the setting until 14 days or until a negative test result has been obtained. if they are not experiencing symptoms, but have tested positive for coronavirus (COVID-19), they should self-isolate for at least 10 days starting from the day the test was taken. • The Confidentiality Policy will be followed at all times – this includes withholding the names of staff, volunteers and children with either confirmed or suspected cases of coronavirus • staff members and parents/carers understand that they will need to be ready and willing to: <ul style="list-style-type: none"> - book a test if they are displaying symptoms. All children can be tested, including children under 5 - provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace - self-isolate if they have been in close contact with someone who tests positive for coronavirus (COVID-19) symptoms • The Setting will contain any outbreak by following local health protection team advice and by notifying Ofsted <p>Personal Protective Equipment</p> <ul style="list-style-type: none"> • gloves, an apron and a face mask from the ‘isolation’ kit will be worn by the supervising adult. • Additional cleaning will be carried out if there is a suspected/confirmed case of Covid-19, following government advice • If child tests positive for Covid-19 other children in their group will be asked to self-isolate for 14 days • Testing will be available for remaining staff and children in group 				<p>PHE SE Health Protection Team on 03442253861. They will liaise with the local Health Protection Team and provide any necessary information or support</p> <p>If there is an outbreak (2 or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus is suspected), the HPT will advise whether any further action is needed. In some cases, they may recommend a larger group self-isolate as a precautionary measure or where an outbreak is confirmed (and in consultation with the local Director of Public Health), they may dispatch a mobile testing unit</p>			
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			<ul style="list-style-type: none"> The Confidentiality Policy is followed at all times – this includes withholding the names of staff, volunteers and children with either confirmed or suspected cases of coronavirus 							
1.12	Reception areas, offices and staff rooms	Staff exposed to the virus through shared equipment	<ul style="list-style-type: none"> Reception areas are clear and clutter free A rota is in place for access to staff areas to support social distancing All tables, shared devices, chair backs and telephones to be cleaned by staff before and after use and at the end of the day with antibacterial cleaner 				<p>Staff each have space to keep personal items in</p> <p>Staff have hanger to store coats</p> <p>Staff leave fleeces onsite and take home to wash at the end of each week</p>			
2.	WELLBEING									
2.1	Staff wellbeing	Staff are worried and feel stressed because of the pandemic and fear of the risk of infection	<ul style="list-style-type: none"> Staff made aware of the measures in place to reduce infection as specified in the RA and given an induction before returning to work Staff are encouraged to raise concerns and suggest additional measures A rota is in place to stagger use of staff areas to support social distancing Staff have carried out free eLearning on Infection Control before returning to work Staff have been given access to BHCC information and well-being support as part of their induction before returning to work Any staff meetings required will adhere to social distancing requirements Changes to working practices will not result in staff missing out on breaks 				<p>In person or video induction given to all staff before returning to work including opportunity to ask questions and raise concerns</p> <p>Touch base meetings will take place with each member of staff and increased frequency of supervision for more vulnerable staff</p>			
2.3	Children's wellbeing	Children anxious about returning or impact of lockdown	<ul style="list-style-type: none"> Children are grouped with siblings and within friendship groups wherever possible High priority is given to the wellbeing of each child and any changes in behaviour or concerns are address with parents 							

		<ul style="list-style-type: none">• Children will be welcomed and activities will be selected based on children’s special interests• Staff will follow guidance on supporting children’s mental health and wellbeing during the coronavirus pandemic												
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3. COMMUNICATION											
3.1	Staff not up to date with most recent advice/guidance	Staff or children may risk exposure to virus if staff are not aware of relevant guidance	<ul style="list-style-type: none"> Managers to read, review and share all relevant information to ensure all staff are kept up to date Designated staff member to check for Government / Council guidance changes daily and notify managers of any significant changes Emergency procedures are regularly reviewed, updated and shared as required Agreed methods of communication – e.g. email, WhatsApp groups, staff contact numbers, etc. Managers has updated contact list for all members of staff 	2	1	L	Ensure all key information and changes are understood by all staff	2	1	L	NS
4. STAFFING											
4.1	Reduced staffing resulting in insufficient -supervision ratios - trained first aiders - qualified staff - 121 support	Children may risk injury. Staff at work may suffer increased stress	<ul style="list-style-type: none"> All Paediatric First Aid and Designated Safeguarding Lead requirements are met with updated training taking place this summer Staff to notify manager as early as possible if they or any member of their household are presenting Covid-19 symptoms and to follow NHS/111 isolation/medical advice Staff to notify manager as early as possible if they have travelled to a country that requires them to self-isolate to 14 days on their return Manager to monitor daily supervision levels to ensure staffing requirements are met Inform Ofsted and the Family Information Service if the setting needs to close 	4	3	M		4	3	M	NS

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5. EMERGENCY EVACUATION & FIRE										
5.1.	Staff and children unable to evacuate the building safety	Injury to children or staff	<ul style="list-style-type: none"> In case of fire or fire alarm activation, everyone to use their nearest available exit route If the recommended social distancing between different groups, in corridors and assembly points is not achievable, ensure the greatest separation available is utilised Staff to be informed of any changes to the fire evacuation procedures if any changes have taken place a fire drill is carried out to practise the new routes/measures 							
List of key Government guidance <ul style="list-style-type: none"> https://www.gov.uk/government/publications/protective-measures-for-holiday-or-after-school-clubs-and-other-out-of-school-settings-for-children-during-the-coronavirus-covid-19-outbreak/protective-measures-for-out-of-school-settings-during-the-coronavirus-covid-19-outbreak#consider-group 										