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	Nurseries	during Coronavir	us Outbreak	National Covid 19 Alert Tool	Likelihood (L) X	Im	pact (I)
by the assessment				1	Almost Impossible	e 1	-	: (minor injury, no me off)
Setting	Honeycrof	t		2	Unlikely	2		permanent injury, 7 days off)
Date of Assessment	05/10/20	Date Assessment to be reviewed	As required	3 Current Level	Possible	3		((injury causing an 7 days off)
Person Completing	N Silsby			4	Likely	4	-	eath or serious njury)
Staff involved in assessment				5	Almost Certain	5	Catastrophic	: (multiple deaths)
					Low =1-3	Moderate = 7	4- Significar = 8-14	nt 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 x I = R

are the significant, seeable, hazards? <i>dangers that can</i> <i>cause harm)</i>	Who is at Risk?	Current control measures (What is already in place/done)	L			What additional controls will be put in place to reduce the risk further?		Risk	ζ	Sign as done
Attendance of Children and Staff	Infection of staff, children and families	 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. Accessible materials widely shared and visible 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: book a test if they or their child is displaying symptoms of coronavirus and must not attend the setting if they have symptoms or have tested positive in the last 10 days. 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 	3	3	M	All staff and children's temperatures taken and recorded at the start of each session. Staff are limited to the minimum needed to look after children by agreeing a rota of staff working in the nursery based on predicted numbers. A further risk assessment will be completed if a child is attending more than one childcare setting or if a member of staff is working in an additional workplace. A short induction process for staff returning to the setting covering all changes will take place.	2	3	M	NS
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				 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 close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate Any confirmed cases will also be reported to Ofsted 								
s c v a c p p c c v	Protecting shielded and clinically vulnerable adults and children, and people with particular characteristics who may be at risk.	Infection of staff, children and families	•	 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 the 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	Μ	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. Staff are offered an individual risk assessment before returning to work.	2	4	Μ	N

forese (the d	re the significant, eeable, hazards? dangers that can cause harm)	Who is at Risk?		Current control measures (What is already in place/done)	1	Ris Ratii		What additional controls will be put in place to reduce the risk further?		eviso Risk Ratin	[Sign as done
1.4	Physical distancing and grouping	Infection of staff and children	•	Early years settings are no longer required to arrange children and staff in small, consistent groups based on the fact that the overall risk to children from coronavirus (COVID-19) is low Settings should still consider how they can minimise mixing to help reduce the number of children and	3	3	M	Children will eat their meals in their group 'base' area Snack and lunch times will be staggered to allow each group to access	2	3	M	NS
				mixing to help reduce the number of children and staff required to self-isolate in the event of children or staff testing positive for coronavirus (COVID-19)				toileting and handwashing area without crossing with another group				
			•	Therefore, to minimised mixing the children will be divided into groups which they stay in throughout each session. Groups are not mixed during the day, or on subsequent days and remain in one zone for each session				The environment has been sectioned off to accommodate smaller group working				
			•	Adult: child ratios specified by the Early Years Foundation Stage are maintained				Records of children and staff in each group, and any close contact that				
			•	Attendance patterns have been reviewed to allow for consistency of groups of children mixing with no more than 14 other children throughout the week wherever possible				takes places between children and staff in different groups will be maintained				
			•	Parents are aware of all measures in place ahead of attending including group requirements				Guidance for parents will include details on physical distancing, groupings and				
			•	The same practitioners are assigned to each group and, as far as possible, these stay the same during the day and on subsequent days				general operational changes				
			•	Small groups stay two metres away from each other throughout the session as much as possible				Although universal use of face coverings in EY settings is currently not recommended, settings should consider their use				
	pening Risk Assessn		•	Universal use of face coverings is currently not recommended in EY settings – unless required for Page 4 of 20				for adults (staff and Honeycroft Autumn 20				

[· · · · · · · ·	
	specific tasks or where 2m distance cannot be	visitors) in situations	
	maintained whilst a symptomatic child is awaiting	where social distancing	
	collection. However, their use for adults, will now be	between adults in settings	
	considered in situations where social distancing is	is not possible (e.g. when	
	difficult, such as moving around in communal areas,	moving around in	
	corridors and during staff meeting and training	corridors and communal	
	sessions where 2m distance cannot be maintained	areas), particularly in the	
		event of local lockdown.	
	If carrying out singing & musical instrument playing		
	activities in a well-ventilated room with as much	Reusable face coverings	
	space as possible between groups. Additionally	should be safely stored by	
	background or accompanying music will be kept to	wearers in individual,	
	a low level so as not to encourage participants to	sealable plastic bags	
	raise their voices. Instruments & equipment will not	between use	
	be shared and should be disinfected between use		
		A small supply of face	
		coverings should be held	
		at the setting, in case they	
		are forgotten, lost,	
		damaged, damp or	
		contaminated.	
		Ensure awareness that	
		some individuals are	
		exempt from wearing face	
		coverings	
		Their use in face-to-face	
		activities with children	
		should still be avoided	
		due to negative impact on	
		learning	
		Face coverings should be	
		worn correctly and clear	
		instructions given	
		9	
		including importance of	
		washing hands	

fores (the	at are the significant, eseeable, hazards? the dangers that can cause harm) Social distancing and grouping continued		(What is already in place/done)	dditional controls e put in place to the risk further?	I	eviseo Risk ating		Sign as done
1.4		Infaction of			L		R	
1.4	distancing and grouping	staff and	Children use the same area throughout the day, with a thorough cleaning of all areas at the end of the day					
			Contact and mixing between children and adults is minimised by amending the environment, remaining in groups and new routines					
			There is space between areas to allow for distancing during the children's play					
			Each group will have time allocated to spent outdoors					
			Sleeping mats adhere to physical distancing where possible and blankets are not shared and washed at a higher temperature					
			Toilet use is staggered where possible					

for	t are the significant, eseeable, hazards? angers that can cause	Who is at Risk?	Current control measures (What is already in place/done)	Risk Rating			What additional controls will be put in place to		evise Risk Ratin		Sign as
•	harm)			L		R	reduce the risk further?	L		R	done
1.5	Health and hygiene	Infection of staff and children	 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 The space is well ventilated using the ventilation units if required Paper towels are used in bathroom area and bins emptied regularly Cleanliness habits are reinforced through games, songs, visuals, adult support and repetition 	3	3	M		2	3	Μ	NS

for	it are the significant, eseeable, hazards? angers that can cause	Who is at Risk?	Current control measures (What is already in place/done)	I	Risk Ratin	g	What additional controls will be put in place to		evise Risk Ratin	Sign as
	•			3		'9 R M	will be put in place to reduce the risk further? Unusable resources have been stored to clear space Staff belongings have been allocated an individual non-shared area	2	Ratin	as done NS
			 Manual scale and are not shared between groups Hands are cleaned thoroughly before and after use of malleable materials 							

fore	t are the significant, eseeable, hazards? angers that can cause	Who is at Risk?	Current control measures (What is already in place/done)		Risk Ratin	g	What additional controls will be put in place to reduce the risk further?		evis Risk Ratin		Sign as done
1.7	harm) PPE and cleaning supplies	Risk of infection if supplies run out	 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 2	3	R M	Supplies are monitored for PPE and cleaning equipment to ensure that a supply of stock is available at all times Supplies received from the LA regarding non- general use PPE	2 2	3	RM	NS
1.8	Arrivals and departures	Infection of staff, children and families	 Parent and carer drop-off and pick-up arrangements have been organised to minimise adult to adult contact by marking two meter spaces for social-distance waiting Parents maintain two metre distancing when they drop off and collect children, by handing over to staff member on the door Only one adult is asked to bring the child for drop off / pick up Parents know their allocated drop off and collection times and the process for doing so, including protocols for minimising adult to adult contact before attending Parents know that that they cannot gather at entrance or enter the site (unless they have a pre- arranged appointment, which should be conducted safely) All adults and children clean their hands-on arrival at the setting No scooter, pushchairs, prams etc. to be left on site 	2	3	M	Guidance has been shared with all parents who, by sending their children, agree to follow it	2	3	Μ	NS

 A process is in place for safely removing face coverings when staff (who use them) arrive at setting. Follow government guidance on how to put on, remove store & dispose of face coverings
 Temporary face coverings are disposed of in a covered bin and reusable face coverings placed in a plastic bag to be taken home. Hands are washed again before or on entry to the learning environment

s	hat are the ignificant, eable, hazards?	Who is at Risk?		Current control measures	Risk Rating					What additional controls will be put in place to reduce the		evise Risk Rating		Sign as
Ċ	angers that can ause harm)			(What is already in place/done)	L	I	R	risk further?	L	I	R	don		
1.9	Travel	Infection of staff and families	•	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	М	bike racks at rear of building promoted to help avoid public transport use	2	3	Μ	NS		
1.10	Visitors	Infection of staff, children and visitor	•	No non-essential visitors can access the centre In instances where essential professionals such as social workers, speech and language therapists or counsellors, or other professionals are needed to support delivery of a child's EHC plan, settings should assess whether the professionals need to attend in person or can do so virtually If they need to attend in person, they are informed in advance of the latest COVID-19 safety arrangements and guidelines to follow relevant to that setting, and the number of attendances is kept to a minimum Essential visitors by appointment only and they are informed of health and safety procedures, including being willing to have temperature taken and remain within social distancing guidance or wear a facemask if this is not possible. Any items used, e.g. pen to sign in, must be cleaned thoroughly The professional should also have completed their own risk assessment that they can share with the setting in advance	2	3	Μ	If a decision has been made to require face coverings for staff in certain situations where social distancing is difficult, such as in communal areas, the arrangements should also be communicated to visitors Visiting professionals are made aware in advance of settings' Covid-19 access arrangements to facilities such as toilets. Where possible, consider designating a specific toilet for visitors which can be cleaned between use.				2S		

1.11	Sickness at the setting	Infection of staff and children	 All essential maintenance and building work is completed outside of operational hours, wherever possible. 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 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 If parents or carers need to enter the setting to help their child settle, they are made aware of the setting's safety guidelines, are asked to avoid close contact with other children and should ideally not stay for longer than an hour. Otherwise parents or carers should not enter the setting unless there is a specific need A record is kept of all visitors which follows the guidance on maintaining records of staff, customers & visitors to support NHS Test & Trace (date & time of visit, name & contact details, who they interacted with) Covid-19 sickness procedure. Adult: If a member of staff falls ill whilst at the centre they will return home and arrange a test Child: A procedure is in place to be followed if a child begins to show symptoms of coronavirus. This includes: The child will be moved to a designated 'safe zone' this will be the 'sensory room' One adult will stay with the child using the 'isolation pack' available including required PPE 	4	3	M	An isolation kit is available at all time in the agreed 'safe zone' A duplicate PPE kit, including a face mask is available and accessible 'safe zone' will receive a deep clean by stoff woaring PPE	3	3	M	NS

 Managers will follow latest PHE South East Health	Helpline on 0800 046
Protection Team: Managing Suspected and Confirmed	8687 (option 1 for
COVID-19 cases in Childcare and Educational Settings	confirmed cases).
FLOWCHART The child will not be able to return to the setting until 10	They will provide any
days or until a negative test result has been obtained Additional cleaning will be carried out if there is a	necessary information
suspected/confirmed case of Covid-19, following	or support
government advice If the effected child tests positive for Covid-19 other	Notify confirmed
children in the same group and staff member will be	cases in settings to
contacted and asked to self-isolate or get tested. They	Brighton & Hove
will not be able to return to the setting until 14 days or	Local Authority
until a negative test result has been obtained. If they are	Education
not experiencing symptoms, but have tested positive for	Department by email:
coronavirus (COVID-19), they should self-isolate for at	educationandskills@b
least 10 days starting from the day the test was taken. The Confidentiality Policy will be followed at all times –	righton-hove.gov.uk
this includes withholding the names of staff, volunteers	and to Brighton &
and children with either confirmed or suspected cases of	Hove Local Authority
coronavirus staff members and parents/carers understand that they	Public Health
will need to be ready and willing to: book a test if they are displaying	Department by email:
symptoms. All children under 5 provide details of anyone they have	Publichealth@brighto
been in close contact with if they were	n-hove.gov.uk and to
to test positive for coronavirus	Ofsted
(COVID-19) or if asked by NHS Test	If there is an outbreak

	action is needed. In some cases, they may recommend a larger group self- isolate as a precautionary measure.
	If you think you may need to close the setting contact your HPT first to discuss the public health perspective

What are the significant, foreseeable, hazards?		Who is at	Who is at Current control measures Risk? (What is already in place/done)				What additional controls will be put in		evise Risk Rating		Sign as
	angers that can ause harm)	s that can L		LI		place to reduce the risk further?	L	I	R	done	
1.11	Sickness at the setting continued	Infection of staff and children	 Personal Protective Equipment Gloves, an apron, protective glasses 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 				If a member of staff or child attending the setting tests positive for coronavirus, reporting the case to PHE SE Health Protection Team on 03442253861. They will liaise with the local Health Protection Team and provide any necessary information or support				
			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				If there is an outbreak (2 or more confirmed cases within 14 days, or an overall rise in				

			 Gloves continue to be worn for nappy changing, food preparation and distribution and first aid administration. Staff are encouraged to wash their hands frequently and have access to hand sanitiser in each zone Staff can select to wear face coverings and gloves routinely if they choose to 	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
1.12	Nappy changing and hazard waste removal	Staff may be exposed to the virus	 Children whose care routinely already involves the use of some PPE due to their intimate care needs continue to receive their care in the same way Additional government guidance is followed on waste removal 	

What are the significant, foreseeable, hazards?	Who is at Risk?	Current control measures (What is already in place/done)	Ris	k Rat		What additional controls will be put in place to reduce the		evise Risk Ratin		Sign as
(the dangers that can cause harm)		(mat is an easy in place, done)		1	R	risk further?	L	Т	R	done
1.13 Reception areas, offices and staff rooms	Staff exposed to the virus through shared equipment	 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 Staff have access to different spaces for breaks to allow for social distancing Staff each have individual space to keep personal items Staff have hanger to store coats Staff leave fleeces onsite and take home to wash at the end of each week 	2	3	Μ	Cleaning materials are available in all area to enable staff to clean the handles of white goods/ cupboards etc and encourage staff to provide their own crockery/ mugs and to remove them from kitchens, and lunch boxes from shared fridges daily	2	3	Μ	NS

:	Vhat are the significant, eeable, hazards?	Who is at Risk?	Current control measures (What is already in place/done)	I	Risk Ratin		What additional controls will be put in		evis Risk Ratin		Sign as
· (langers that can cause harm)					R	place to reduce the risk further?	L	I	R	done
2.			WELLBEING								
2.1	Staff wellbeing	Staff are worried and feel stressed because of the pandemic and fear of the risk of infection	 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 Rotas are in place to stagger use of staff break spaces as much as possible 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 Staff meetings taking place remotely via video or audio link, outdoors or in well-ventilated rooms Changes to working practices do not result in staff missing out on breaks 	2	2	M	Either in-person or video induction is given to all staff before returning to work including opportunity to ask questions and rise concerns Increase the frequency of supervision for vulnerable staff	2	2	Μ	NS
2.3	Children's wellbeing	Children anxious about returning or impact of lockdown	 Children's sessions have been reserved based on parent's assessment of if the child is ready to return or not Regular updates from home are encouraged via Tapestry and daily care diary, with option to send messages home, is completed for each child each day 	2	2	М	Photos of key people, and the altered environment have been sent out to families for them to talk about before start back	2	2	Μ	NS

			•	High priority is given to wellbeing and any changes to behaviour or concerns are address with parents as soon as possible								
forese	/hat are the significant, eable, hazards?	Who is at Risk?		Current control measures (What is already in place/done)	Risk Rating		g	What additional controls will be put in place to reduce the	Revised Risk Rating			Sign as
	angers that can ause harm)				L		R	risk further?	L	Т	R	done
2.3	Children's wellbeing continued	Children anxious about returning or impact of lockdown	•	Children will be welcomed back and settled personally, linking to specific needs and special interests. The theme for the new term is 'all about me' specifically planned to support this								
			•	Guidance on supporting children's mental health and wellbeing during the coronavirus pandemic has been shared with staff								
2.3b	Children's wellbeing unable to	Children at risk of missing a meal	•	Nursery to inform parents/carers to bring in a pack lunch if meals are unavailable for any reason	2	1	L		2	1	L	NS
	provide meals		•	Ensure any food preparation policy in place for COVID-19 including: hygiene, cleaning of equipment and arrangements to ensure social distancing for their own staff and when making deliveries								
2.4	Staff home working	Staff may be injured as they are not used to	•	Staff have received guidance to support working from home	2	1	L		2	1	L	NS
		working at home and have limited equipment	•	Staff receive regular 'check-ins' whilst working from home								

What are the significant, foreseeable, hazards?		Who is at Risk?	/ho is at Risk? Current control measures (What is already in place/done)				What additional controls will be put in		evise Risk Ratin		Sign as
(the a	langers that can cause harm)		(What is already in place/done)	L	I	R	place to reduce the risk further?	L	1	R	done
3.			COMMUNICATION								
3.1	Staff not up to date with most recent advice/guida nce	Staff or children may risk exposure to virus if staff are not aware of relevant guidance	 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. 	2	1		Ensure all key information and changes are understood by all staff	2	1	L	NS
			Managers has updated contact list for all members of staff								
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	 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 	4	3	M		4	3	Μ	NS

			•	Inform Ofsted and the Family Information Service if the setting needs to close						
5.				EMERGENCY EVACUATION & FIRE	•					
5.1.	Staff and children unable to evacuate the building safety	Injury to children or staff	•	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	2	3	M			NS
<u>Safe</u> Other re <u>Supp</u> <u>Guid</u> <u>Ofste</u>	working in educe elevant guidance porting vulnerabl ance on the tem ed's response to	e children and you	<u>d cl</u> ng r fou			<u>ctive</u>	equi	<u>pment (PPE)</u>		
Govern	ment guidance	<u>is available here</u>								