About this Risk Assessment:

- This RA is used to mitigate the risk from COVID-19 and should be used alongside any other risk assessment for the task being undertaken
- This risk assessment includes the current lockdown status (whether national or as part of Tier 3 Alert Level) and the Government's Local Covid Alert Level for Brighton & Hove (in the table above) as a guide/baseline on the likelihood of infection without control measures in place. The Covid Alert Level is based on several local factors including the COVID-19 reproduction (R) number a scientific measure of how fast the virus is spreading
- The risk assessment will be reviewed whenever the Local COVID Alert Level changes or when notice of a lockdown is given
- Lockdowns may be national or initiated locally if Local Covid Alert Level reaches Tier 3

Task / Activity Covered	Nurseries	during Coronavir	us Outbreak	National Covid 19 Alert Tool	Likelihood (L)	Х	Impact (I	()
by the assessment		•		1	Almost Impossible	е	1	Insignificant (minor time off)	
Setting	Honeycrof	t – during second n	ational lockdown	2	Unlikely		2	Minor (non-permar up to 7 days	, ,
			As required – see	3 National	Possible		3		
Date of Assessment		Date Assessment	about this risk	Lockdown in place				Moderate ((injury	causing
Date of Assessment		to be reviewed	assessment					more than 7 da	ys off)
	05/11/20		below						
Person Completing	N Silsby			4	Likely		4	Major ((death or injury)	serious
Staff involved in	S Deda & A	Marks		5	Almost Certain		5	Catastrophic (multi	ple deaths)
assessment	J Deda & A	IVIGINS							
To calculate Risk Rating (impact (I) the accident mig					Low =1-3	Modera 7	ite = 4-	Significant = 8-14	High = 15-25

Covid Alert Level and Lockdown Status

Government's LOCAL COVID-19 ALERT LEVEL	Tier 1 MEDIUM	Tier 2	HIGH	Tier 3	VERY HIGH
for Brighton & Hove					
Lockdown in Place [YES/ NO]	YES [5 th November – 2 nd December]				

fores	are the significant, seeable, hazards? dangers that can cause harm)	Who is at Risk?	Current control measures (What is already in place/done)	L	Risl Ratir		What additional controls will be put in place to reduce the risk further?		evise Risk Ratin		Sign as done
1.			TRANSMISSION OF VIRUS								
1.1	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 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 close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate 	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
			· · · · · · · · · · · · · · · · · · ·								

Protecting shielded and clinically vulnerable adults and	Infection of staff, children and families	•	Shielded & clinically vulnerable children and adults should follow government advice From 5 November, those children whose doctors have confirmed they are still clinically extremely vulnerable are	3	4	М	Staff are offered an individual risk assessment before returning to work.	2	4	M	NS
children, and people with particular characteristics who may be at risk.			advised not to attend settings during the period lockdown measures are in place. However, many children originally identified as clinically extremely vulnerable, earlier in the year, no longer need to follow original shielding advice. Parents should be advised to speak to their child's GP or specialist clinician if they have not already done so, to understand whether their child should still be classed as clinically extremely vulnerable.								
		•	As of 5 November, staff who are clinically extremely vulnerable are advised to work from home and not to go into work. Individuals in this group will have been identified through a letter from the NHS or from their GP & may have been advised to shield in the past. Staff and children who live with someone who is clinically extremely with someone who is clinically extremely.								
		•	extremely vulnerable, but who are not clinically extremely vulnerable themselves, should still attend settings. Staff and children who are clinically vulnerable or have underlying health conditions but are not clinically extremely vulnerable, may continue to attend settings in line with current guidance & subject to individual risk assessments								
		•	All other staff should continue to attend work, including those living in a household with someone who is clinically extremely vulnerable.								
		•	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.								
		•	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				

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)	Ris Rati		What additional controls will be put in place to reduce the risk further?		evis Risk Ratin	ζ	Sign as done
1.4 Physical distancing and grouping	Infection of staff and children	 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 Adult: child ratios specified by the Early Years Foundation Stage 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 wherever possible Parents are aware of all measures in place ahead of attending including group requirements The same practitioners are assigned to each group and, as far as possible, these stay the same during the day and on subsequent days Small groups stay two metres away from each other throughout the session as much as possible Universal use of face coverings is currently not recommended in EY settings – unless required for specific tasks or where 2m distance cannot be maintained whilst a symptomatic child is awaiting collection. However, they will be used by staff as follows; When on the door greeting children and parents for drop off or pick up times When meeting an essential visitor When meeting with others for longer than 15 minutes and a 2-meter distance cannot be maintained When working alongside others in one spot for longer than 15 minutes and a 2-meter distance cannot be maintained Staff are responsible for ensuring their face shield is; Clearly named Kept clean and sanitary 	3	M	The environment has been sectioned off to accommodate smaller group working in zones Children will eat their meals in their group 'bubble' zone Snack and lunch times will be staggered slightly to allow each group to access toileting and handwashing area without crossing with another group Records of children and staff in each group, and any close contact that takes places between children and staff in different groups will be maintained Guidance for parents will include details on physical distancing, groupings and general operational changes A supply of face coverings is held at the setting, in case they are forgotten, lost, damaged, damp or contaminated. Their use in face-to-face activities with children is	2	3	M	NS

			•	- Store away safely when not in use, not left lying around If carrying out singing & musical instrument playing activities in a well-ventilated room with as much space as possible between groups. Additionally background or accompanying music will be kept to a low level so as not to encourage participants to raise their voices. Instruments & equipment will not be shared and should be disinfected between use				avoided due to negative impact on learning Face coverings should be worn correctly and clear instructions given including importance of washing hands			
fores	are the significant, seeable, hazards?	Who is at		Current control measures		Risk Ratin		What additional controls	evise Risk		Sign as
	dangers that can	Risk?		(What is already in place/done)	•		9	will be put in place to	Ratin	g	
	dangers that can cause harm) Social	Risk?		(What is already in place/done)	L	I	R	will be put in place to reduce the risk further?		g R	done

Sleeping mats adhere to physical distancing where possible and blankets are not shared and washed at a

Toilet use is staggered where possible

higher temperature

for	at are the significant, reseeable, hazards? dangers that can cause	Who is at Risk?	Current control measures (What is already in place/done)	ı	Risl Ratir		What additional controls will be put in place to reduce the risk further?		Revise Risk Ratin	ζ.	Sign as 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 do so 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	M	NS

What are the sign foreseeable, haz (the dangers that can	ards?	Who is at Risk?	Current control measures (What is already in place/done)		Risk Ratin		What additional controls will be put in place to reduce the risk further?		evise Risk Ratin		Sign as done
harm)				L	ı	R		L	ı	R	
1.6 Cleaning		Infection of staff and children	 Where any part of the premises has been closed, all required H&S checks are carried out before reopening Surfaces that children touch, such as toys, books, tables, chairs, doors, sinks, toilets, are cleaned more regularly than normal using standard detergents Toys that have been mouthed by babies and young children are placed in the sterilising buckets immediately 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 other than basic change of clothes, nappies and slippers Bedding is not shared by children and washed weekly at high temperature 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	Unusable resources have been stored to clear space Staff belongings have been allocated an individual non-shared area	2	3	Μ	NS

fore	t are the significant, eseeable, hazards? angers that can cause	Who is at Risk?	Current control measures (What is already in place/done)	ı	Ris Ratir	ng	What additional controls will be put in place to reduce the risk further?		evise Risk Ratin	g	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	3	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	3	M	NS
1.8	Arrivals and departures	Infection of staff, children and families	All parents dropping off or picking up children have been asked to now; - Wear a face covering - Remain behind the 2-meter mark - Wait at two meter intervals from each other - Wait for their child's allotted start time - Be patient while waiting for the door to be opened 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	2	3	M		2	3	M	NS

	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

forese	hat are the significant, eable, hazards?	Who is at Risk?	Current control measures (What is already in place/done)	Ris	k Rati		What additional controls will be put in place to reduce the		evise Risk Ratin		Sign as
	angers that can ause harm)	Mak:	(What is already in place/done)	L	I	R	risk further?	L	1	R	done
1.9	Travel	Infection of staff and families	 Employment bike schemes are advertised to staff as an alternative chose of travelling to work Bike storage is available on site for staff choosing to cycle The car parking space is offered on rotation to staff choosing to drive Staff are reminded now to offer lifts to each other, as a safe social distance can not be maintained Parents 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	bike racks at rear of building promoted to help avoid public transport use	2	3	M	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 Delivery workers and suppliers will not enter the centre, instead food deliveries and other parcels will be drop-off at door 	2	3	M	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				NS

			 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 Currently parents/carers are not able to help their child settle, instead regular virtual updates are provided to the family to show how the child id doing 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) 				which can be cleaned between use.				
1.11	Sickness at the setting	Infection of staff and children	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 The child will leave the building with parent/ care via the shortest route After any contact with someone unwell, staff must wash their hands thoroughly and the area around the person with symptoms should be cleaned with normal household disinfectant after they have left Managers will follow latest PHE South East Health Protection Team: Managing Suspected and Confirmed COVID-19 cases in Childcare and Educational Settings FLOWCHART The child will not be able to return to the setting until 10 days or until a negative test result has been obtained	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 staff wearing PPE If a member of staff or child attending the setting tests positive for coronavirus, report the case to the DfE Helpline on 0800 046 8687 (option 1 for confirmed cases). They will provide any necessary information or support	3	3	M	NS

- Additional cleaning will be carried out if there is a suspected/confirmed case of Covid-19, following government advice
 If the effected child tests positive for Covid-19 other children in the same group and staff member will be contacted and
- 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:
 - 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
- In the event of a positive test of a child or adult for Covid-19, please inform us via eyc@brighton-hove.gov.uk with the following information;
 - the name of your setting
 - whether the case is a child or member of staff

Notify confirmed cases in settings to Brighton & Hove Local Authority Education Department by email: educationandskills@brighton-hove.gov.uk and to Brighton & Hove Local Authority Public Health Department by email: Publichealth@brighton-hove.gov.uk and to

Ofsted

If there is an outbreak (2) or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus is suspected), call Surrey & Sussex Health Protection Team (HPT) on 0344 225 3861 (0844 967 0069 out of hours) or if the matter isn't urgent, email SSHPU@phe.gov.uk They will advise whether any further action is needed. In some cases, they may recommend a larger group self-isolate as a precautionary

measure.

	 their initials confirmation that the person has received a positive test 		If you think you may need to close the setting contact your HPT first to discuss the public health perspective			
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S	What are the significant, foreseeable, hazards? Who is at Risk?		Current control measures (What is already in place/done)			ating	What additional controls will be put in place to reduce the	Revise Risk Rating			Sign as
C	angers that can ause harm)		(What is already in place/done)	L	I	R	risk further?	L	I	R	done
1.11	Sickness at the setting continued	Infection of staff and children	 Personal Protective Equipment Face shields have been provided to all staff and spares are kept on site 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 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				
			 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 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 Gloves continue to be worn for nappy changing, food preparation and distribution and first aid administration. Staff 				or support 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				

			•	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				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								
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	M	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	M	NS

si foresee	hat are the ignificant, eable, hazards?	Who is at Risk?	Current control measures (What is already in place/done)	F	Risk Ratin	g	What additional controls will be put in place to reduce the	Revised Risk Rating			Sign as
	nngers that can nuse harm)		(What is already in place/done)		I	R	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 wellbeing 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	M	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 High priority is given to wellbeing and any changes to behaviour or concerns are address with parents as soon as possible 	2	2	M	Photos of key people, and the altered environment have been sent out to families for them to talk about before start back	2	2	M	NS
What are the significant, foreseeable, hazards? (the dangers that can		Who is at Risk?	Current control measures (What is already in place/done)	F	Risk Rating		What additional controls will be put in place to reduce the		Rating		Sign as done
•	use harm)			_		- 1	risk further?	L	ı	R	30110

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 provide meals	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 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	1	L	2	1	L	NS
2.4	Staff home working	Staff may be injured as they are not used to working at home and have limited equipment	•	Staff have received guidance to support working from home Staff receive regular 'check-ins' whilst working from home	2	1	L	2	1	L	NS

si foresee	nat are the gnificant, able, hazards?	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		evis Risk Ratin		Sign as
ca	ngers that can use harm)		, , , , ,	L	I	R	risk further?		ı	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. 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	ı							
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 (July 2020) 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
5.			EMERGENCY EVACUATION & FIRE								
5.1.	Staff and children unable to	Injury to children or staff	In case of fire or fire alarm activation, everyone to use their nearest available exit routes	2	3	M					NS

evacuate the building safety	•	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				

Guidance on infection prevention and control

Safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE)

Other relevant guidance

- Supporting vulnerable children and young people during the coronavirus outbreak
- Guidance on the temporary early years foundation stage (EYFS) coronavirus (COVID-19) disapplications
- Ofsted's response to coronavirus (COVID-19)
- EYFS reforms: government consultation response

Government guidance is available here: <a href="https://www.gov.uk/guidance/education-and-childcare-settings-new-national-restrictions-from-5-november-2020?utm_source=5%20November%202020%20C19&utm_medium=Daily%20Email%20C19&utm_campaign=DfE%20C19