COVD 19 – NURSERY RISK ASSESSMENT

REMEMBER!!!

Hierarchy of measures set out in government guidance:

- o avoid contact with anyone with symptoms
- o frequent hand cleaning and good hygiene practices
 - o regular cleaning of settings
 - o and minimising contact and mixing

Activity:	Childcare during Coronavirus (Covid-19) Pandemic			Hub Nursery:	ATHERTON/STREATHAM - HOMELAND/RICHMOND		
Assessor:	AA	Ref No.:		Distribution:			
Date:	JUNE 2020	Proposed Review Date:		ongoing	Signed:		

Hazard Risk	Individuals at risk	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to	Residua I Risk
Staffing & spread of Covid-19 virus to staff, young people and families	All building users including staff, young people, catering, cleaning & site staff	High	 Implement all advice and communicate to staff. Currently any person developing a new continual cough or a temperature in excess of 37.8°C whilst at work must be sent home and advice re self-isolating offered https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection. △ ADDITIONAL - lack of a sense of smell has now been added to the list of symptoms □ Staff showing signs of Covid 19 will have a test booked for them by senjor staff and will not return until a negative result received • The government is developing a new national test and trace programme. This will bring together an app, expanded web and phone-based contact tracing, and swab testing for those with potential coronavirus symptoms. This programme will play an important role in helping to minimise the spread of coronavirus in the future. It will also include more traditional methods of contact tracing if a child, young person or parent tests positive.' □ Maintain a bank of staff ready to bring in should staff on rota be unable to work. 	Ensure it is appropriately sanitised after each use or use disposable caps. Check staff daily for symptoms – as staff sign in they are self-declaring fitness Ensure staff lists are maintained with manager – Up-date rota as required. Ensure staff understand this is part of their duty of care	Medium

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				 □ Maintain communication with staff to ensure that bank is current. □ Staff have been asked to declare any underlying medical conditions and/ or pregnancy. Those in a high-risk group (as defined by the PHE advice) are advised to seek advice from NHS 111 or GP practice. 'Guidance on social distancing for everyone in the UK and protecting older people and vulnerable adults'. □ Staff who live alone and have symptoms of coronavirus illness (COVID-19), however mild, stay at home for 7 days from when their symptoms started. □ Where staff are living with others and they are the first in the household to have symptoms of coronavirus, then they must stay at home for 7 days, but all other household members who remain well must stay at home and not leave the house for 14 days. The 14-day period starts from the day when the first person in the house became ill □ For anyone else in the household who starts displaying symptoms, they need to stay at home for 7 days from when the symptoms appeared, regardless of what day they are on in the original 14-day isolation period 		
Young people & spread of Covid-19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff	High	 □ Following national guidance the operational plan for the setting links to keeping phase groups apart and maintaining staff continuity where possible. □ Children attending the nursery who exhibit signs of a new continuous cough or a temperature in excess of 37.8 °C will be assessed by staff and parents asked to collect them. □ ADDITIONAL - lack of a sense of smell has now been added to the list of symptoms □ Parents will be advised to follow current government guidance. If a young person presents to a member of staff, their temperature will be checked prior to allowing them admittance. □ Nursery will maintain current contact details for all children in attendance including a secondary contact. □ All staff to be aware of where to locate the list. □ If a child needs to be sent home after exhibiting symptoms, they will be separated safely from the main group and allowed to use identified toilet. The toilet will not be used by others □ Such individuals will be monitored by a member of staff. □ After use, the toilet will be cleaned by cleaning or site staff using normal proprietary cleaning products. □ Any siblings living in the same household will also be sent home. 	Thermometers – check accuracy Identify quarantine isolation room for children and identify toilet arrangements	Medium

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Inadequate cleaning & spread of Covid-19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff	High	 □ Cleaning with usual cleaning products will continue, with at least 4 times daily cleaning of highly used areas – door handles, bannisters, taps. □ Frequently touched hard surfaces should be cleaned. □ Telephones, keyboards, light switches, electronic entry systems etc., should be cleaned with anti-viral wipes. □ Ensure that electronic entry systems and keypads are regularly sanitised particularly first thing in the morning and where possible after each use. □ All bins will be lined and the liner removed at the end of the day, sealed/knotted and placed in the main waste container at the end of the day. □ Regularly check stocks of cleaning chemicals, liquid soap, paper towels, tissues, toilet roll, bin bags etc. and request additional supplies as necessary. □ Ensure disposable tissues are available in each room for both staff and children. 	Carry out inventory check of cleaning products and stock at regular intervals, restocking as necessary. Notify LA of any short-comings and ensure Hub is a priority for resources	
Inadequate hand washing & spread of Covid-19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff	High	 □ Staff/children/cleaners/contractors etc. will be reminded to wash their hands before leaving home, on arrival at the premises and before and after handling cleaning chemicals, eating/drinking, using the toilet, after physical activities and after coughing or sneezing and not to touch face (eyes, mouth, nose) with hands that are not clean. □ Wash with liquid soap & water for a minimum of 20 seconds (see hand wash guidance). □ Alcohol based hand cleansers/gels (containing at least 60% alcohol) can be used if soap and water are not available, but is not a substitute for hand washing. □ Consideration should be given to allocating individual toilets and sinks to children where numbers are low and this is achievable, otherwise sinks and toilets will be regularly sanitised throughout the day. □ Hands must be dried properly to prevent infection and drying out. Pat dry rather than rub to avoid discomfort. Supplies of hand cream (aqueous cream or similar) should be made available to help prevent soreness. □ Additional hand sanitiser units to be installed in the school where possible and at the main entrance to the school and in the dining hall. 	Poster around the setting as appropriate. Ensure all sinks have necessary stock & restock as necessary. Ensure all attending understand how to wash hands correctly Sanitise sinks daily Allocate sinks to individual children and staff (repeat sinks).	Medium
Inadequate personal protection & PPE & spread of Covid-19 virus to	Infection spread leading to serious respiratory illness, death	All building users including staff, young people,	High	☐ In order to minimise the risk to colleagues from used Personal Protective Equipment (PPE), it is essential that it is removed in a safe manner. To begin with, remove the apron. If you have worn gloves, remove them next by turning them inside out in one single motion. ☐ Disposable items should be placed in the bin immediately.	Ensure adequate bins and tissues are made available. Ensure nursery has a stock of rubber gloves and if needed, disposable gloves.	Medium

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staff, young people and families		catering, cleaning & site staff		 □ Rubber gloves should be washed and dried properly before reuse. □ Sneeze into a tissue or sleeve NEVER into hands. Wash hands immediately after (as above). □ Used tissues will be put in a bin immediately (as above – all waste bins to be lined – preferably double-lined). □ Face masks will be provided for anyone who is sat in isolation with a child showing symptoms and awaiting collection by parent – linking to isolation room details in operational plan. 	Ensure all staff and children know the procedures to follow. Signage as appropriate.	
Inappropriate social distancing measures not followed & spread of Covid-19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff	High	 □ All to observe social distancing in line with government guidance as much as possible https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-social-distancing-in-education-and-childcare-settings. □ Phase groups to maintain distancing from other phase groups in line with operational plan, but young children and staff within the same phase group do not abide by social distancing guidelines as for older children and adults. Emotional needs must be met. □ Minimise, or remove all together, soft toys and other more difficult to keep clean equipment. □ Other equipment can be sanitised at the end of the day, but keep to a minimum. Milton is brilliant and goes a long way. □ Staff will be briefed regularly, at least in line with changes to government guidance. 	Daily sanitising as appropriate. Daily briefings to staff as necessary, particularly as there may be different staff covering.	Medium
Practical food activities & spread of Covid- 19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff	High	 □ Practical food activities with children should not take place. □ Catering − all food will be served either hot on a clean plate or packaged. □ Young people will be encouraged to sanitise their hands before choosing their food. □ Kitchen waste to be disposed of as usual. □ Manager asked to ensure there is at least a full days' additional supply of milk and basics. 	Ensure all children new to premises understand how to dispose of food. Liaise with catering staff to ensure additional supplies.	Low
Visitors & spread of Covid-19 virus to staff, young people and families	Infection spread leading to serious respiratory illness, death	All building users including staff, young people, catering, cleaning & site staff and visitors	High	 □ Visitors to the premises will be discouraged and all non-essential visitors will be cancelled or postponed. Any essential visitors will be asked to complete a Visitors Health Questionnaire. □ Parents will be asked to drop off at an allocated entrance and not enter premises. 	Ensure parents know drop off and pick up routines. Have copies of essential visitor health questionnaire printed for when / if needed	Low

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Hazard	Risk	Individuals at risk	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to	Residua I Risk
Fire and intruder alarms and emergencies	Inability to operate emergency systems or procedures	All building users including staff, young people, catering, cleaning & site staff and visitors	High	 □ All staff to undergo induction in the fire and emergency routines and accident/first aid procedures. This may not be the usual routes. Repeat as necessary with new starters (staff). □ Ensure the site is safe – including the operation of intruder and fire alarms. □ Staff must be aware of the operation of the security and fire alarm system and what to do in an emergency situation including how to call emergency services (ensure staff aware if there is a prefix to obtain an outside line from the hub landline(s). □ Ensure that emergency cut-off points for water, gas and electric are clearly marked and known by the senior designated member of staff and that details of emergency contacts for utilities are readily available. □ If necessary, change the criteria for call out to ensure the emergency services are alerted immediately, should the alarms trigger during silent hours (this may be a change from current practice, where the 	Hold a fire and 'invacuation' (lockdown) drill at earliest convenience. Brief staff and children on First Aid procedures of the school. Brief rota staff on operation of fire and intruder alarms. Make available the codes on and off site and ensure all know how to access should it be required. Ensure key staff know gas, water and electric cut-off points and how to operate them.	Low
Holding internal Fire Doors open	Rapid fire and smoke spread	All building users including staff, young people, catering, cleaning & site staff and visitors	High	police are currently summoned if necessary, by a keyholding service for the intruder alarm for example). Propping fire doors open by any other means other than proprietary hold open devices triggered by the fire alarm is normally not permitted. However, all reasonable methods of preventing infection spread will need to be introduced. The risk of a fire starting is probably lower than the risk of infection spread. If fire doors are held open, alter your documented and practical procedures to ensure that more staff are appointed to ensure ALL fire doors are closed if the fire alarm sounds or fire is discovered. Ensure fire doors to rooms not being used are closed. Use wedges to hold open doors – these can be easily kicked out should there be an emergency situation. Only hold doors open where access through them is required during the day and where the room beyond is occupied. This will reduce the risk of contamination. At the end of each day, ALL fire doors must be closed. Wipe down contact points with a proprietary cleaning product ready for the next day. Final exits should not be secured with devices requiring a key to unlock them. There is a conflict between fire and security in schools. It is acceptable to secure exit doors with very simple cabin hooks or sliding bolts as the risk of a child escaping is far greater than the risk of a fire starting. Children are never left unsupervised so there is always an adult available to unhook bolts/hooks and worse-case scenario, a child could easily use a chair to reach the hook/bolt.	Review fire doors appropriate to setting. Train staff in the correct procedures in the event of fire emergency – repeat as necessary – monitor via fire drills	Low

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Hazard	Risk	Individuals at risk	Risk Rating	Control Measures What are we doing now?	Notes/Additional Control Measures What more do we need to	Residua I Risk
Lack of leadership and management	First aid and safeguarding issues being missed/ unaddressed	Staff and young people	High	 □ Designate a 'Senior Leader' for each day the setting is open — this may well change day by day, but all other supporting staff need to know who will take charge in the event of an emergency. □ The rota for staff should include at least one member of staff with a first aid certificate (paediatric if the users are early years). Ensure first aid boxes are appropriately stocked. □ Designated Safeguarding Lead or Deputy DSL does not need to be on site at all times, but MUST be contactable by phone throughout the session period. A rota may be used for this purpose. □ Key telephone numbers of all available DSL's/deputies to be provided to staff covering the setting. □ Ensure the contact details of the Safeguarding Hub/Early Help Team/LADO are available to all staff on duty. Posters can be downloaded from the KAHSC website https://www.kymallanhsc.co.uk/Document/DownloadDocument/9547 □ Ensure that Child Protection information is known by the 'senior designated leader' for all those who are attending from alternative schools. □ Information must be held securely. □ Access to such confidential information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) where normally access would be restricted to the DSL/deputy. Confidentiality of records must be maintained at all times. 	Design and share rota identified for each day. Senior will keep track of staff attendance, any staff absences -and reasons given Senior will keep track of children in attendance each day Note First Aiders on site — and prepare list for required training updates Make contact details available to all staff for DSL Display Safeguarding information/poster for all staff and ensure all staff attending know the DSL for the day.	Low
Inadequate procedures for managing medical needs	Medical needs of young people not being met	Young people particularly and staff	High	 Ensure staff are aware of any medical issues affecting individual attendees including staff. Senior staff will administer medication to children. They will need training in specialist administration e.g. adrenaline auto-injector, insulin pump, epilepsy medication etc., but other than that, no specialist qualification is required providing they follow the instructions on the packaging/from the dispenser. Inhalers – check the date of the inhaler; that it is not empty and that it is prescribed for the child in question. Allow them to self-administer if appropriate. Record the time and date the inhaler was used/medication was administered. Ensure safe storage and, for children who do not normally attend the setting, return to the parent at the end of each day. Emergency pain-relief: 	Have medicine sheets ready for parents to sign and share details with staff. Ensure all medical needs are clearly identified with focus on children not from our setting. Ensure all medicines are stored in accordance with current policies of the school, in a fridge if needed. Emergency medication must not be locked away – it must be readily accessible for use in an emergency.	

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				 Parents will have signed to say they consent to their child being given emergency pain relief; this will have been included in our registration documentation. Do not administer until after 12.00 p.m. unless you are sure that a child has not been given pain relief in the preceding 4 hours. Check the date on the medication. Ensure the spoon or syringe is clean and sanitised. Only administer the minimum recommended dose. Clean and sanitise the spoon/syringe after use. Record the time and date of the administration along with the name of the child and date of birth. Use existing record sheets for this purpose. Inform parents at the end of the session of what medication or pain relief has been administrated, the time it was given and the dose. 		
Safeguarding issues	Unsuitable people working with children & young people	Young people	High	 □ All staff have DBS Certificates □ Should a member of staff employed by another of our Group nursery they will provide DBS details. □ Ensure that there is no taking or using of images. Individual consent from parents will not then be required. □ Staff will receive refresher safeguarding/child protection training ahead of 1st June 	Maintain staffing rotas Keep track of who, for valid reason, could not attend training on operational plan/safeguarding etc.	Low
Child or member of staff becomes seriously ill at NURSERY (unrelated to current pandemic)	Death or serious medical emergency	Students and staff	Med	 □ Follow NHS guidelines. □ Call 999 if necessary. □ Isolate the ill person in in a Firs Aid room - closely monitor if a child – do not leave alone – they will be with a senior staff member – send all other occupants out of the phase group room to 'stand by' room to a place of safety. □ Implement first aid as necessary. □ Maintain medical hygiene procedures throughout – wear gloves if needed and wash hands thoroughly and frequently and after the patient has left in the care of the paramedics. 		Low
Anxious children	Emotional impact of lockdown on the children – now and in to the	children	MED	Staff will support emotional needs of the children – social distancing is not possible with the younger age group.	Refresh staff training on supporting emotional well-being of children	

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	future – impact on development			Staff will work with families – following any information shared as to the child has reacted to lockdown at home – return to setting health questionnaire Face masks, unless a child has been isolated on site awaiting collection, should not be worn by staff – for could lead to stressing children						
Vulnerable children (link to safeguarding above)	Children being 'victims' while at home due to lockdown	children	HIGH	 Each setting will have a Designated Person for Safegua Deputy on site (or contactable in line with guidance). Staff will work with the Local Authority Safe-Guarding Services to support vulnerable children 	□ Staff will follow Safeguarding / Child Protection training guidance □ Each setting will have a Designated Person for Safeguarding and □ Deputy on site (or contactable in line with guidance). □ Staff will work with the Local Authority Safe-Guarding team and Social □ Services to support vulnerable children □ Staff will have refresher training linked to signs of abuse and what to			Refresh staff training on safe-guarding matters		
Supporting staff well-being	Mental health deterioration of staff	Staff team	MED	□ Transparent communication with staff – in work and still on furlough/shielding □ Health questionnaire - from 1 st June training sessions □ 1:1 supervisions maintaining □ Rebuilding team – focus of seniors and directors			tain communicatio Il as home for prolo			
	Further Action Required					Date RA Reviewed	Significant Changes Y/N		with Staff or N/A	
This risk assessmer child.	nt must be read and f	ollowed in conjun	ction with o	other applicable risk assessments for the setting or for the						