Hub School (Emergency Childcare) – Coronavirus (Covid-19) Pandemic Risk Assessment Template



COVID 19 – NURSERY RISK ASSESSMENT

REMEMBER!!!

Hierarchy of measures set out in government ongoing guidance and most recently for new lockdown 7th Jan 2021:

- Education and childcare settings: national lockdown from 5 January 2021 Guidance for all early years settings and local authorities in England
 - o avoid contact with anyone with symptoms
 - o frequent hand cleaning and good hygiene practices
 - 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: JANUARY 2021 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		Residual Risk
Staff and families not abiding to TIER /LOCKDOWN restrictions	Increased spread of COVID, serious illness, and bubbles/whole settings needing to close	All building users including staff, young people, catering, cleaning & site staff	high	 keeping up to date with local tier restrictions and lockdown guidance displaying any required additional guidance around the setting informing staff of impact and importance of restrictions reinforcing travel guidelines for those using public transport keeping families updated 	Discussing impact of Tier and lockdown changes to everyday running of the setting.	medium
Staffing & spread of Covid-19 virus to staff, young people and families	Serious respiratory illness, death	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 high temperature (37.8°C) (or hot to touch on your chest or back) 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/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection. △ADDITIONAL - lack of a sense of smell and taste has now been added to the list of symptoms 	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.	Medium

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				 Staff showing signs of Covid 19 will be asked by seniors to complete a COVID test before returning to work The government has further developed its national test and trace programme, bringing together an app, expanded web and phone-based contact tracing, and swab testing for those with potential coronavirus symptoms. This programme plays an important role in helping to minimise the spread of coronavirus in the future. It also include more traditional methods of contact tracing if a child, young person or parent tests positive.' We will follow national guidance and updates regarding vaccinations Maintain a bank of staff ready to bring in should staff on rota be unable to work. 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 119 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 10 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 10 days, but all other household members who remain well must stay at home and not leave the house for 10 days. The 10-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 10 days from when the symptoms appeared, regardless of what day they are on in the original 10-day isolation period 	CONTINGENCY PLANS WILL BE CHECKED WEEKLY BY SENIOR ON SITE AND ADAPTED IF NECESSARY TO MEET THE IMMEDIATE NEEDS OF THE NURSERY MANAGERS WILL KEEP EVIDENCE OF STAFF AND CHILDREN ISOLATING - INCLUDING TRACK AND TRACE RECORDS VACCINES -to support national campaign for vaccinating EY staff – higher priority Ensure staff understand this is part of their duty of care	
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	 □ Children attending the nursery who exhibit signs of a new continuous cough or a high temperature (37.8°C), feels hot to touch or lack of a sense of smell and taste will be assessed by staff and parents asked to collect them. □ Will be assessed by staff and parents asked to collect them. □ ADDITIONAL - lack of a sense of smell and taste 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 by 	In-ear thermometer – as above.	Medium

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				a senior staff member and if child's displays temp they will wait in the isolation room with senior. 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.	Identify quarantine room for children and identify toilet arrangements (use downstairs toilets) Ensure all PPE is ready to hand in isolation room MANAGERS WILL KEEP EVIDENCE OF STAFF AND CHILDREN ISOLATING - INCLUDING TRACK AND TRACE RECORDS	
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 systems, keypads and internal room phones 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. □ Should a bubble be closed there will be a deep clean of the room ahead of the return of the bubble and preferably at least 72 hours break in using the room if possible – carpets, vinyl flooring, hard surfaces and soft furnishings – in line with Public Health guidance linking to an isolated case, or a confirmed 'outbreak'. 	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 CLEANING AGENCIES IF USED WILL PROVIDE FURTHER INFORMATION REGARDS PRODUCTS USED, AND CLEANING ROUTINE Additional cleaning will be planned for if a bubble closes – following guidance from Public Health	medium
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). 	Poster around the setting as appropriate. Ensure all sinks have necessary stock & restock as necessary. Ensure all attending understand how to wash hands correctly	Medium

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				 □ 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, 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 nursery where possible and at the main entrance. 	Sanitise sinks daily Allocate sinks to individual children and staff (repeat sinks).	
Inadequate personal protection & PPE & 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	 □ 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. □ 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). 	Ensure adequate bins and tissues are made available. Ensure nursery has a stock of rubber gloves and if needed, disposable gloves. Ensure all staff and children know the procedures to follow. Signage as appropriate.	Medium
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. □ Minimise, or remove all together, soft toys and other more difficult to keep clean equipment. □ Other equipment can be sanitised throughout the day and 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,	High	 □ Practical food activities with children should <u>not</u> 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.	Low

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		cleaning & site staff			Liaise with catering staff to ensure additional supplies.	
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. □ Parents will be asked to drop off at an allocated entrance and not enter premises. □ Parents / carers / visitors will be asked to wear a face covering upon drop off/collection/coming on to site with permission. □ Staff may wear clear visors at handover times 	Ensure parents know drop off and pick up routines. ESSENTIAL VISITORS ON SITE — CONTRACTORS FOR PRIORITY WORK, SEN SUPPORT STAFF etc. WILL SIGN A DECLARATION OF HEALTH AND FOLLOW SOCIAL DISTANCING GUIDANCE AS GIVEN	Low
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 police are currently summoned if necessary, by a keyholding service for the intruder alarm for example). 	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	 □ 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 	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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				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. Fire 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.		
Lack of leadership and management	First aid and safeguarding issues being missed/ unaddressed Ratios being at risk	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. CONTINGENCY PLAN □ 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. □ The seniors will do all they can to maintain room ratios, and following Ofsted disapplication guidance, may have to do their best in maintaining the most appropriate groupings should staffing be difficult in certain bubbles, knowing that overall on site the ratios are being met, and seniors are on emergency stand by if needed. □ 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 	Design and share rota with clear leader identified for each day. CONTINGENCY PLANS WILL BE CHECKED WEEKLY AND ADAPTED IF NECESSARY TO MEET THE IMMEDIATE NEEDS OF THE NURSERY Include DSL / DDSL and First Aiders Make contact details available to all staff for DSL	Low
				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 settings. Information must be held securely − following GDPR guidance. https://www.kymallanhsc.co.uk/Document/DownloadDocument/9547 Information is known by the 'senior designated leader' for all those who are attending from alternative settings. Information may need to be given to the senior designated member of staff">Information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) White-Health-Information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) White-Health-Information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) White-Health-Information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) White-Health-Information may need to be given to the senior designated member of staff (in the absence of the nominated DSL/deputy) White-Health-Information member of staff (in the absence of the nominated DSL/deputy) White-Health-Information member of staff (in the absence of the nominated DSL/deputy) White-Health-Information member of staff (in the absence of the nominated DSL/deputy)		

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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 – with a witness. □ They will need training in specialist administration e.g. adrenaline autoinjector, 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: 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. 	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.	
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. 	Maintain staffing rotas	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 First 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. 		Low

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				 ☐ 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. 		
Anxious children	Emotional impact of lockdown on the children – now and in to the future – impact on development	children	MED	 □ Staff will support emotional needs of the children – social distancing is not possible with the younger age group. □ 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 – a clear visor may be worn by more vulnerable staff for collection/drop off 	Refresh staff training on supporting emotional well-being of children	Low
Vulnerable children (link to safeguarding above)	Children being 'victims' while at home due to lockdown	children	HIGH	 □ 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 do if you suspect a child is being abused 	Refresh staff training on safe-guarding matters	High
Introducing a New Bubble	Possible issues with settling in to new room Stairs — tripping/falling hazard	Children Staff Visitors	LOW	 □ Communication with parents/children – informing those concerned of the change in room □ Presenting to children how to use access their new room safely, eg stairs □ Presenting to children the new room layout, coat/bag storage etc □ Presenting to children – how to access toilets safely □ Staff ensuring that they support children emotionally during the change 	New room has been prepared – cleaned and resourced appropriately Nearby toilets labelled – ensuring one stays as 'Isolation' Toilet Staff to be made aware of access/exit details for the new room Monitoring of access to the new bubble eg stair safety if relevant, first floor landing etc – review whether any additional steps need to be put in place linked to safety, practical and/or emotional support.	Low
Staff well- being being impacted upon by	Mental health deterioration of staff – and associated links	Staff team	MED	 □ Transparent communication with staff – in work and absent □ Health questionnaire – update in January 2021 □ 1:1 supervisions maintaining □ Rebuilding team – focus of seniors and directors 	Need to maintain communication with those staff at home for prolonged period – manager, PAs and directors – and if necessary work on a specific 'working	medium

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COVID measures	to physical well- being			 □ If having to work from home for a prolonged time then the in work with seniors to ensure safe procedures are in place regard being support, communication, confidentiality and work cond □ BUPA support for all staff – 24/7 contact for mental well-being □ Seniors doing Staff Well-Being training and implementing it at Keeping staff up to date with rota changes and an understand necessary (but keeping to confidentiality guidance) 	arding well- ditions. g support s required	from home' p circumstance	olicy for individual s.		
Risk to staff training being maintained due to COVID restrictions	Staff knowledge and CPD falling behind	Staff team Children – due to possible Decrease in staff awareness	LOW	 □ Staff will be offered online training courses to maintain their competency levels of working with children □ Staff will also be able to receive professional updates via paper memos, 1:1 socially distanced supervisions □ Should training require in person involvement (eg First Aid) the carried out in bubbles, working with social distancing and fur measures eg staff will sign to confirm they are well, and may face coverings. 	er courses, nen such will be ther safety	Ongoing CPD is important to the company, and suitable bespoke training will be found and offered as required – L.A, NDNA etc. First Aid training extended by Ofsted till late Nov.		Low	
	Further Action Required						Significant Changes Y/N		with Staff or N/A
This risk assessr Young Person.	ment must be read a	and followed in	conjunction	with other applicable risk assessments for the setting or for the	8 th JAN 21				