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*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*

For further info on risk assessment see: [BHCC Risk Assessment Guidance](https://new.brighton-hove.gov.uk/coronavirus-covid-19-information-staff/risk-assessments)

Risk Assessment Form

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| **Task / Activity Covered by the assessment** | **Model Risk Assessment for:**  **Early Years Settings including Nurseries and Childminders during Coronavirus Outbreak**  **Updated 18 January 2022** | | | Likelihood (L) | X | Impact (I) | | |
| Almost Impossible | 1 | Insignificant (minor injury, no time off) | | |
| **Workplace** | **Fizzy Fish Nursery and Pre Schools** | | | Unlikely | 2 | Minor (non-permanent injury, up to 7 days off) | | |
| **Date of Assessment** | 18 Jan 22 | Date Assessment to be reviewed | 18 Mar 2022 | Possible | 3 | Moderate ((injury causing more than 7 days off) | | |
| **Person Completing** | Lou Adams | **Manager** | Lou Adams | Likely | 4 | Major ((death or serious injury) | | |
| **Staff involved in assessment** | **Lou Adams, Karen Fothergill, all staff** | | | Almost Certain | 5 | Catastrophic (multiple deaths) | | |
|  | | | | **Low =1-3** | **Moderate = 4-7** | | **Significant**  **= 8-14** | **High**  **= 15-25** |

**How to use 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.
* To calculate Risk Rating (R): assess the likelihood (L) of a member of staff/others contracting COVID-19, taking into account the control measures that will be in place against the most likely impact (I) of contracting COVID-19 might have L x I = R
* This risk assessment includes the national [COVID - 19 alert tool](https://www.bbc.co.uk/news/explainers-52634739) (in the table above) as a guide/ baseline on the likelihood of infection **without control measures in place.** By introducing control measures the risk in the workplace should be no higher than the current Alert level and where possible the risk will be reduced to below the current level. The national level is based on the COVID-19's reproduction (R) number, a scientific measure of how fast the virus is spreading and as R reduces, the alert level will be lowered by the Government.
* **The risk assessment must be reviewed whenever the national Coronavirus alert level changes.**
* **The risk assessment has been received due to new guidance from PHE and Local Authority on 12 January 2022**

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.** | **TRANSMISSION OF VIRUS** | | | | | | | | | | |
| **1.1** | **Attendance of Children and Staff** | Infection of staff, children and families | * Communicate to staff and parents/carers that they need to be ready and willing to: * book a test if they or their children are 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 & Trace * If PCR is positive, staff may be able to end their self-isolation period before the end of the 10 full days. They can take an LFD test from 5 days after the day their symptoms started (or the day their test was taken if they did not have symptoms), and another LFD test on the following day (day 6). The second LFD test should be taken at least 24 hours later. If both these test results are negative, and they do not have a high temperature, they may end their self-isolation after the second negative test result and return to the setting on day 6. * Public Health also recommend that staff continue to take daily LFD tests on day 7-10 inclusive even if they have ended their isolation early following 2 negative LFD tests. If any of the test results are positive, the staff member should isolate and should wait 24 hours before taking the next LFD test. * Those who end their self-isolation period before 10 full days are also strongly advised to:   • limit close contact with other people outside their household, especially in crowded, enclosed or poorly ventilated spaces  • work from home if they are able to  • wear a face covering in crowded, enclosed or poorly ventilated spaces and where they are in close contact with other people  • limit contact with anyone who is at higher risk of severe illness if infected with COVID-19 (including not visiting those in care homes or hospitals)  This advice should be followed until 10 full days from when their self isolation period started. Settings should consider whether these conditions can be met, and if they cannot, it is recommended that the staff member carry out the full 10 days isolation period   * Children may also end their isolation early, if the same conditions apply, however LFD testing is at parental or guardian discretion (and the government states that regular LFD testing is not suitable for under 5s) therefore if LFD tests are not carried out, children should isolate for the full 10 days * Self-isolate in line with government guidance, if they have been in close contact with someone who develops coronavirus symptoms or someone who tests positive for coronavirus or if they are required to quarantine following [government travel advice](https://www.gov.uk/guidance/travel-to-england-from-another-country-during-coronavirus-covid-19) after having travelled to England from another country. * However, if staff live in the same household as someone with COVID-19 ~~a~~nd are not symptomatic/unwell, are \*fully vaccinated or aged under 18 years and 6 months, they are not required to self-isolate, but are strongly advised to take a LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result. * If a child under 5 is a contact of a confirmed case, they are not required to self-isolate and do not need to start daily testing. If they live in the same household as someone with COVID-19 they should limit their contact with anyone who is at higher risk of severe illness if infected with COVID-19, and arrange to take a PCR test as soon as possible. They can continue to attend a setting while waiting for the PCR result and if the test is positive, they must follow the general self isolation guidance * If (as a close contact), a staff member or child develops [symptoms](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection#symptoms) while they are isolating, they should [arrange to have a PCR test](https://www.gov.uk/get-coronavirus-test). If the test result is positive, they should follow the [advice for people with COVID-19](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection#SymptomsPositiveTest) to stay at home and must start a new self-isolation period. * Settings can decide if they want to ask parents to keep children who are contacts away from the setting until they have completed a negative PCR test, particularly if they are a household contact. In an outbreak situation Public Health may also advise you to issue a template letter to parents instructing them to isolate their child as a contact of a case. * Inform the setting immediately of the results of a test. * Information given to all parents/carers. Accessible information, posters and online materials widely shared and visible. * Government guidance is followed * Parents and carers closely monitor children for signs of Covid-19 symptoms in line with guidance. NB. Vaccines can cause a mild fever in children. This is a common and expected reaction and should be considered when making decisions about whether isolation is required. Whilst teething can cause some known side effects such as flushed cheeks and sore gums, NHS guidelines state that fever is not a symptom of teething. Parents and carers should monitor side effects from a vaccination or teething, and if their child has a temperature they should consider seeking medical advice before returning to the setting. * Parents and carers give daily confirmation that child/household are symptom-free. * Parents and carers encouraged to limit the number of settings their child attends, ideally ensuring their child only attends the same setting consistently. This should also be the same for staff, where possible. * Asymptomatic testing is now available to EY staff. Settings are provided with lateral flow device test kits with which staff can self-swab. Staff are asked to take test kits home and carry out the test twice a week. Staff must report their result to NHS Test and Trace as soon as the test is completed, either online or by telephone as per the instructions in the home test kit. Staff should also share their result with their nursery to help with contact tracing. However, testing is not mandatory & staff do not need to provide proof of a negative test result to work, although participation in testing is strongly encouraged. * Staff with a positive test result will need to self-isolate in line as per guidelines and will also need to arrange a polymerase chain reaction (PCR) test to confirm the result. Staff with a negative test result can continue to attend school or nursery and use protective measures. * The asymptomatic testing programme does not replace the current testing policy for those with symptoms. Anyone with symptoms (even if they recently had a negative LFD test result), should still self-isolate immediately according to government guidelines. Those with symptoms are also expected to order a test online or visit a test site to take a polymerase chain reaction (PCR) test to check if they have the virus. | **1**  **2**  **2**  **1**  **1** |  | **4**  **8**  **8**  **4**  **1** | * Consider limiting the number of staff attending to the minimum needed to look after children by agreeing a rota of staff working in the nursery based on predicted numbers. * Children are not to attend more than one childcare setting. Parents have been informed and agree to this. * Risk assessment to be put in place if staff working in more than one setting. * EMAS can be contacted to support parents with English as an additional language. * Plan short re-induction process for staff returning to the setting covering changes in setting. | **1**  **1**  **2**  **1** | **1**  **4**  **4**  **4** | **1**  **4**  **8**  **4** |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.2** | **Protecting shielded and clinically vulnerable adults and children and people with particular characteristics who may be at risk.** | Infection of staff, children and families | * Shielding advice has now been ended. All CEV or CV children should attend their setting unless they are one of a very small number of children under paediatric or other specialist care and have been advised by their GP or clinician not to attend. CEV children returning to a setting should have an Individual Risk Assessment in place. * Clinically Extremely Vulnerable staff are advised to follow medical advice and latest government [Guidance](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/cev-from-2-dec). CEV & CV staff and those who live with someone who is CEV will attend work subject to agreed Individual Risk Assessment in place/reviewed * Pregnant staff should follow the government guidance for pregnancy & be subject to individual risk assessments. They are advised to take particular care to practise frequent, thorough hand washing, and cleaning of frequently touched areas in their home or workspace~~,~~ taking particular care when they are 28 weeks pregnant and beyond. Further advice is available from the [Royal College of Gynaecologogists.](https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/covid-19-virus-infection-and-pregnancy/)   .   * 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. * Staff and the families of children who have been travelling abroad should follow the rules on arriving in England following international travel, as set out in red, amber and green list rules for entering England. * Settings support and encourage vaccine take up and enable all staff who are eligible for a vaccination to attend booked vaccine appointments, where possible. | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | * Staff are offered an individual risk assessment before returning to work. For clinically vulnerable staff who have continued to work, managers may wish to discuss flexibilities to support them, such as staggered start times to reduce travel during rush hour. * Consider, continuing to take care to socially distance from other adults including older children and adolescents wherever possible | **1** | **4** | **4** |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.3** | **Physical distancing and grouping** | Infection of staff and children | * Adult: child ratios specified by the [Early Years Foundation Stage](https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2) are maintained: [LINK](file:///C:\Users\tamsinchapman\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\WRX7Z8S9\•%09https:\www.gov.uk\government\publications\early-years-foundation-stage-framework--2\early-years-foundation-stage-coronavirus-disapplications) * Attendance patterns reviewed to allow for consistency of groups of children and key person where possible. * It is recommended settings keep a record of children and staff in each group, and any close contact that takes places between children and staff however as of 19th July, close contacts are identified via NHS Test and Trace and settings are no longer expected to undertake contact tracing , unless contacted in exceptional cases to help identify close contacts * Learning opportunities and time spent outdoors maximised. | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | Consider the following:   * Nappy changing to be carried out in the same area to minimise movement around the childcare setting and then cleaning procedures to be adhered to between changes * In areas where it will be more difficult to socially distance, ensure that staff and parents are aware of the procedures in place to support social distancing for the safety of staff, parents and children | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.4** | **Face coverings** | Infection of staff and children | * Face coverings should be worn when moving around the premises, outside of classrooms, such as in corridors and communal areas and in enclosed and crowded spaces where you may come into contact with people you don't normally meet. In addition, if staff wish to still wear them in other circumstances, this will be supported * Reusable face coverings safely stored by wearers in individual, sealable plastic bags between use | **1**  **1** | **4**  **4** | **4**  **4** |  |  |  |  |  |
| **1.5** | **Health and hygiene** | Infection of staff and children | * All adults and children clean their hands according to [guidance on hand cleaning](https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public): [LINK](https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public) * Handwashing facilities are available. Where a sink is not nearby an appropriate hand sanitiser is provided. * All adults and children clean their hands on arrival at the setting, before and after eating, and after sneezing or coughing. * Help given to children who have trouble cleaning hands independently. | **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4** | * We have a number of sinks in all settings that outside stations are not considered to be required at this stage. | **1** | **1** | **1** |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.5** | **Health and hygiene continued** | Infection of staff and children | * 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 emptied regularly throughout the day. * Spaces well ventilated using natural ventilation (opening windows, preferably one at each end of a room to allow clear air flow) or ventilation units. In colder weather, windows should be opened just enough to provide constant background ventilation and periodically opened more fully where possible (e.g. between room uses) * Poorly ventilated areas identified and steps taken to improve fresh air flow – extra consideration when holding events/others on site * Use of fans discouraged, as can spread contaminated air from one person onto another – and only used after considering other ventilation and heat reducing measures. Sited (e.g.. under/in an open window) so drawing and pushing fresh air around a room and not directed/blowing air from one person to another. * Doors propped open, where safe to do so to * Paper towels to be used for drying hands * Cleanliness habits reinforced through games, songs, visuals, adult support and repetition. | **1**  **1**  **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4**  **4**  **4** | To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures should also be used as appropriate:   * opening high level windows in preference to low level to reduce draughts * increasing the ventilation while spaces are unoccupied * re-arranging furniture where possible to avoid direct draughts   Heating should be used as necessary to ensure comfort levels are maintained, particularly in occupied spaces. |  |  |  |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.6** | **Cleaning** | Infection of staff and children | * Where any part of the premises has been closed, ensure all required H&S checks are carried out before reopening to staff and children. * Surfaces that children touch, such as toys, books, tables, chairs, doors, sinks, toilets, light switches cleaned more regularly than normal using standard detergents. [LINK](COVID-19:%20cleaning%20of%20non-healthcare%20settings%20guidance.) * Toys that have been mouthed by babies and young children are disinfected immediately. * Any shared items and surfaces cleaned and disinfected frequently. * Hands cleaned thoroughly before and after use. * Clear procedures and processes for cleaning food preparation areas, dining areas and table coverings * Different groups do not need to be allocated their own toilets, but toilets will need to be cleaned regularly and children must be encouraged to clean their hands thoroughly after using the toilet * Regularly clean electronics, such as tablets, touch screens, keyboards, telephones and remote controls throughout the day. * Outside equipment cleaned between groups of children using it. * Multiple groups do not use items simultaneously. * No items to be brought from home unless essential for wellbeing. * Towels, flannels and bedding are not shared by children * Soft toys that are hard to clean removed & soft furnishings removed or if not possible, covered with a washable covering * Non-essential items removed where there is space to store them elsewhere. | **1**  **1**  **1** | **4**  **4**  **4** | **N/A**  **4**  **4**  **4** | If local infection rates are high and the risk is increased, consider the following:   * Sharing of toys, resources and equipment reduced as much as possible * Resources that are shared between groups, such as sports and art equipment to be cleaned frequently and meticulously and/or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different groups. * Outside equipment cleaned between groups of children using it. * Multiple groups do not use items simultaneously. * No items to be brought from home unless essential for wellbeing. * Towels, flannels and bedding are not shared by children. * Soft toys that are hard to clean removed & soft furnishings removed or if not possible, covered with a washable covering. * Non-essential items removed where there is space to store them elsewhere. * Use of malleable materials risk assessed, supervised closely on a small scale and replaced throughout session. * Providing additional storage for unusable resources and staff belongings. * Specified cleaning rota put in place detailing tasks and their frequency – laminated copy in each room * Identify cleaning hot spots and site hygiene stations at those locations. * More frequent cleaning of rooms that are used by different groups * If seasonal decorations such as Christmas decorations are coming out of storage, they are cleaned before use, and then cleaned again before returning to storage. Decorations are hung out of reach of children to discourage touching, and avoided on horizontal surfaces, as this impedes thorough cleaning of the area. They are also not be placed anywhere where they might impede ventilation, (e.g. if they prevent windows from being opened) and they are not placed in any area where clinical procedures may be carried out by visiting Healthcare Professions. Artificial trees are recommended over live ones for ease of cleaning | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.7** | **PPE and cleaning supplies** | Risk of infection if supplies run out | * An adequate supply of essential supplies is available. A monitoring system for PPE and cleaning supplies ensures that a supply of stock is available to all who require. PPE and cleaning supplies will be added to the shopping lists to be sent to area manager each week. * Spares will be maintained in nursery setting. * Colour coded clothes to be used as has always been the case at Fizzy Fish | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | Consider the following:   * How to ensure supplies of soap, antibacterial gel and cleaning products. * How to ensure access to PPE |  |  |  |  |
| **1.8** | **Arrivals and departures** | Infection of staff, children and families | * Parent and carer drop-off and pick-uparrangements organised to minimise adult to adult contact by staggering drop-off and collection times for children. * Parents maintain two metre distancing when they drop off and collect children, whilst maintaining safeguarding/visual controls. * Only one parent brings the child to the setting. | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | Consider the following:   * Accessing rooms directly from outside. This can be achieved in our pre schools * A queuing system with one way in and one way out. This can be achieved in our nursery. Up the path to go in and down the driveway to go out. |  |  |  |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.8** | **Arrivals and departures continued** | Infection of staff, children and families | * Parents know their allocated drop off and collection times and the process for doing so, including protocols for minimising adult to adult contact (for example, which entrance to use). * Parents know that that they cannot gather at entrance gates or doors 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 * Parents leave buggies, car seats and scooters at the setting. They are left externally * Process/communication 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. | **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4** | Buggies and car seats can be left in the buggy shed at nursery. They can only be left outside at the preschools. |  |  |  |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.9** | **Travel** | Infection of staff and families | * Parents and staff are made aware of recommendations on transport to and from childcare settings to reduce unnecessary travel on public transport where possible and avoid peak times. | **1** | **4** | **4** |  |  |  |  |  |
| **1.10** | **Visitors** | Infection of staff, children and visitor | * Specialists, therapists, clinicians and other support staff for SEND children will provide interventions as usual. They, as well as other professionals or other temporary staff, can move between settings. They should ensure they minimise contact and maintain as much distance as possible from other staff. Such specialists will be aware of the PPE most appropriate for their role. * Essential delivery workers and suppliers are informed not to enter the setting if they are displaying any symptoms of coronavirus: [LINK](https://www.gov.uk/coronavirus) * Food deliveries arranged to maintain hygiene and social distancing advice, with outdoor drop-off when possible. * All essential maintenance and building work are completed outside of operational hours. | **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4** | * BHISS will attend the setting for SEND support * 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. * Sainsbury’s deliver all food with outdoor drop-off and maintaining social distancing. This has been carried out during lockdown when open for vulnerable and critical worker children. | **1**  **1** | **1**  **1** | **1**  **1** |  |

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| **L** | **I** | **R** | **L** | **I** | **R** |
| **1.10** | **Visitors continued** | Infection of staff, children and visitor | * 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. * Visits that allow a vulnerable child to meet a social worker, key worker or other necessary support should continue on site. Visits for SEND therapies should also continue on site. * 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 our settings, and the number of attendances is kept to a minimum. * The professional should also have completed their own risk assessment that they can share with our setting in advance. * Settings can continue to engage agency staff and students. Supply staff and other temporary workers can move between settings but setting leaders should consider how to minimise the number of visitors to the setting where possible. All such staff are informed of setting’s latest Covid-19 safety arrangements and guidelines to follow and are given an induction relevant to that setting. The presence of any additional members of staff should be agreed on a weekly rather than a daily basis, where possible, in order to limit contacts * A record is kept of all visitors which follows the guidance on maintaining records of staff & visitors to support NHS Test & Trace (date & time of visit, name & contact details, who they interacted with). | **1**  **1** | **4**  **4** | **4**  **4** | * Visiting professionals are made aware in advance of our Covid-19 access arrangements to facilities such as toilets. Where possible, we will consider designating a specific toilet for visitors which can be cleaned between use. * For new admissions, consider providing virtual tours for prospective parents and carers. * If parents and carers are keen to visit in person, settings should inform them in advance of the latest COVID-19 safety arrangements and guidelines to follow relevant to that setting, e.g. covering face coverings, hand washing, social distancing etc * Where possible, visits should be held after hours. If this is not possible, consider limiting visits to the outside play areas during regular hours, and ensure strict social distancing is observed   Consider the following:   * Settling in sessions will only be carried out if in compliance with this risk assessment and the safety of the children and staff take precedence. |  |  |  |  |
| **1.11** | **Sickness at the setting** | Infection of staff and children | Covid-19 sickness procedure.  **Adult:**   * If a member of staff fell ill whilst at the setting they would return home immediately and arrange a PCR test.   **Child:**  A procedure is in place to be followed if a child began to show symptoms of coronavirus. This includes:   * The child being moved to a designated ‘safe zone’ * One adult to stay with the child * The child to leave the building with parent/ carer as soon as possible * If the child needs the bathroom while waiting to be collected, they will be taken to a separate bathroom if possible and the bathroom will be cleaned and disinfected using standard cleaning products before being used by anyone else. * After any contact with someone unwell, staff must wash their hands thoroughly and the area around the person with symptoms should be cleaned with disinfectant after they have left | **1**  **1** | **4**  **4** | **4**  **4** | Consider the following:   * Ensuring a duplicate PPE kit, including a face mask is available and accessible * Any implications of the ‘safe zone’ being left unused for 72 hours before deep cleaning * 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.~~ to the DfE Helpline on 0800 046 8687 (option 1 for confirmed cases). They will liaise with the local Health Protection Team and provide any necessary information or support and will also advise who at the setting is classed as a close contact and will also need to self-isolate. * Notify confirmed cases in settings to Brighton & Hove Local Authority Education Department by email: eyc@brighton-hove.gov.uk * Report confirmed staff or child cases to [Ofsted](https://www.gov.uk/guidance/report-a-serious-childcare-incident). They should also be informed if the setting needs to be closed * Engage with the NHS Test & Trace procedure where a child or member of staff is symptomatic or has been diagnosed. |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **1.11** | **Sickness at the setting continued** | Infection of staff and children | **Personal Protective Equipment**   * A face mask will be worn by the supervising adult if two metres cannot be maintained with the child. If contact or personal care for the child is necessary, gloves, an apron and a face mask will be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection will also be worn. * Additional cleaning will be carried out if there is a suspected/confirmed case of Covid-19, following government advice: [LINK](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings) | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | * If we think we may need to close the setting we will contact our HPT first to discuss the public health perspective. |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **1.11** | **Sickness at the setting continued** | Infection of staff and children | * Testing will be available for remaining staff and children. * Follow latest PHE South East Health Protection Team: Managing Suspected and Confirmed COVID-19 cases in Childcare and Educational Settings [FLOWCHART](http://www.beem.org.uk/Services/5776) * 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 * Settings should not request evidence of negative test results or other medical evidence before welcoming children back after a period of self-isolation, however if a parent or carer insists on a child attending the setting, and the setting has concerns that the child has not fully recovered or completed the full isolation period, the setting can take the decision to refuse the child if, in their reasonable judgement, it is necessary to protect their children and staff from possible infection with coronavirus Any such decision would need to be carefully considered in the light of all the circumstances and current public health advice * Engage with the NHS Test & Trace procedure where a child or member of staff is symptomatic or has been diagnosed. * Report confirmed staff or child cases to the H&S Team via the online incident reporting system and to [Ofsted](https://www.gov.uk/guidance/report-a-serious-childcare-incident). | **1**  **1** | **4**  **1** | **4**  **1** |  |  |  |  |  |
| **1.12** | **Nappy changing and hazard waste removal and toileting including coronavirus particles being spread through flushing the toilet.** | 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. * Guidance in the setting’s current H&S procedure is followed for nappy changing. * Additional government guidance is followed on waste removal. * Children should be supported to do as much as possible for themselves. * When changing nappies staff are to wear PPE if required. Following current procedures for nappy changing and washing hands thoroughly after changing nappies, helping a child in the toilet with bottom wiping. * Used nappy and PPE to be disposed of in yellow nappy bin/bags. * If an accident happens then the child should be helped to get cleaned and changed, Clothes should be bagged and put in own back pack and clean clothes should only be their own clothes from home. When a child has been helped to get changed the area should be thoroughly cleaned. * Children must be flushing the toilet themselves and encouraged to do so and it must be flushed each time a child uses the toilet. | **1**  **1**  **1**  **1**  **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4**  **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4**  **4**  **4**  **4**  **4** | Consider the following:   * If staff have to flush the toilet because a child has not done so and they cannot determine who flushed the toilet, then staff must ensure that they are facing away from the toilet flush and them wash their hands. A face mask can be worn if required. |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **1.13** | **Office** | Staff exposed to the virus through shared equipment | * Office space clear and clutter free. * Rotas in place for access to office to adhere to social distancing. * All tables, key boards, desks, chair arms and telephones to be cleaned before and after use, between shifts, and at the end of the day with antibacterial cleaner. * Staff to have allocated phones and desks wherever possible. * Workstations positioned to give two metre distance. * Limit use of high-touch items such as printers. * Staff should clear workspaces and remove their own waste and belongings from the work area at the end of a shift * Ensure that white goods, microwaves, kettles and taps are cleaned with anti-viral sanitiser as part of the daily clean by cleaning staff | **1**  **1**  **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4**  **4**  **4** | Consider the following:   * Reducing the number of people staff have contact with where possible * Arranging desk in office so that staff work 2 metres apart where possible. * Providing antibacterial spray, in kitchen areas 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 |  |  |  |  |
| **1.14** | Trips to indoor and outdoor public places |  | * Settings can take groups of children on trips to indoor and outdoor public places and do not need to be limited to 6 people, provided it is for educational or childcare purposes and the EYFS ratios are maintained. A risk assessment is carried out for each trip and must demonstrate that the group can remain socially distant (2 metres) from other people and groups, wherever possible. Good hygiene measures are followed and hand washing takes place before and after the trip. The use of private outdoor space should be maximised. * The use of public transport should be avoided for outings as we have the minibus * In indoor places (such as libraries), the guidelines for that location are followed and in addition, setting leaders should remain with the children in their group, the group should socially distance from other individuals and groups and children and staff should wash hands thoroughly on arrival and before leaving. Adults will also be required to follow the face covering policy for the indoor space. This may include wearing a face covering before entering and keeping it on until they leave, except when eating or drinking at a table, or when entering/whilst in the playframe |  |  |  |  |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **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 and involved with these, as specified in the RA. * Staff can raise concerns/implement additional measures. * Rotas are in place to stagger staff arrival, departure to support 2 metre social distancing * Staff have access to free eLearning on Infection Control: [LINK](https://www.virtual-college.co.uk/resources/2020/03/free-infection-control-press-release) * Staff have access to BHCC information and well-being support: [LINK](https://new.brighton-hove.gov.uk/supporting-your-wellbeing) * Staff meetings taking place remotely via video or audio link or outdoors or in well-ventilated rooms | **1**  **1**  **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4**  **2**  **4** | **4**  **4**  **4**  **4**  **2**  **4** | Consider the following:   * Allocate time to discover and support staff’s individual worries or concerns through meetings with Lou and Karen * Ensure staff carrying out the ‘Additional Support’ role for a child with complex needs are well supported both practically and emotionally * Increase the frequency of supervision for vulnerable staff. * Appointing a Mental Health First Aider in the setting: [LINK](https://www.sja.org.uk/) * Keep in contact with staff who are not working according to best practice advice: [LINK](https://www.acas.org.uk/) |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **2.2** | **Staff wellbeing continued** | Staff are worried and feel stressed because of the pandemic and fear of the risk of infection | * CPD and training accessed via eLearning when possible. * Ensure changes of working practices do not lead to staff missing out on regular breaks * Management will promote mental health and wellbeing awareness to staff and will offer support where they can * Internal communication channels and cascading of messages through Managers will be carried out regularly to reassure and support employees in a fast-changing situation * Managers will offer support to staff who are affected by Covid-19 or has a family member affected * Regular communication of mental health information and open door policy for those who need additional support | **1**  **1**  **1**  **1**  **1**  **1** | **2**  **2**  **2**  **2**  **2**  **2** | **2**  **2**  **2**  **2**  **2**  **2** | * The government have compiled a list of mental health resources for staff, parents, carers and children: <https://dfemedia.blog.gov.uk/2021/02/01/mental-health-resources-for-children-parents-carers-and-school-staff/> |  |  |  |  |
| **2.3** | **Children’s wellbeing** | Children anxious about returning or impact of lockdown | * Encourage updates from home, via phone, current online systems. * Find out about each child’s experience of lockdown including positives, negatives, any experiences of separation and loss, anxiety about returning, confusion, bereavement. Update information on SEND, health and learning, with high priority given to wellbeing. | **1**  **1**  **1** | **1**  **1**  **1** | **1**  **1**  **1** | Consider the following:   * The government have compiled a list of mental health resources for staff, parents, carers and children: <https://dfemedia.blog.gov.uk/2021/02/01/mental-health-resources-for-children-parents-carers-and-school-staff/> |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **2.3** | **Children’s wellbeing continued** | Children anxious about returning or impact of lockdown | * Plan for welcoming each child and settling them back personally, linking to specific needs and special interests. * Reintroduce the child’s Key Person. * Use visual timetables to share the new structure and routines. * Follow guidance on supporting children’s mental health and wellbeing during the coronavirus pandemic: [LINK](https://www.gov.uk/government/publications/covid-19-guidance-on-supporting-children-and-young-peoples-mental-health-and-wellbeing) | **1**  **1**  **1**  **1** | **1**  **1**  **1**  **1** | **1**  **1**  **1**  **1** |  |  |  |  |  |
|  | **Air conditioning and ventilation during Covid-19 outbreak** | Staff and children could catch the virus from the spread through ventilation systems | * Ensure that staff utilise all ways of increasing the supply of fresh air before using fans. Fans can then be used to improve the circulation of outside air and prevent pockets of stagnant air. * The risk of transmission through the use of ceiling and desk fans is extremely low. | **1** | **1** | **1** | Consider the following:   * Where to place the fans to ensure the best air flow |  |  |  |  |
| **2.4** | **Staff home working**  (Lou and Karen) | Staff may be injured as they are not used to working at home and have limited equipment | * Ensure that staff have access to DSE equipment if needed, e.g. separate mouse and keyboard for laptop, or chair. * Staff have access to [BHCC information and wellbeing support](https://new.brighton-hove.gov.uk/supporting-your-wellbeing): [LINK](https://new.brighton-hove.gov.uk/supporting-your-wellbeing) | **1**  **1** | **4**  **4** | **4**  **4** | Consider the following:   * How staff can access guidance to working from home * How to enable regular check-ins with home-working staff. * Developing local guidance regarding expectations for working from home |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
| **L** | **I** | **R** | **L** | **I** | **R** |
| **3.** | **COMMUNICATION** | | | | | | | | | | |
| **3.1** | **Staff not up to date with PHE/Government/DfE & BHCC advice/guidance** | Staff or children may risk exposure to virus if staff are not aware of relevant guidance | * Managers to read, review and share PHE/DfE/Government information and advice from BHCC ensuring all staff are kept up to date, including emails from the Council & [government guidance](https://www.gov.uk/government/publications/actions-for-educational-and-childcare-settings-to-prepare-for-wider-opening-from-1-june-2020) * Designated staff member to check [for Government / Council guidance changes](https://new.brighton-hove.gov.uk/coronavirus-covid-19/help-residents-access-food-deliveries) daily and notify managers of any significant changes * Emergency procedures to be regularly updated and shared with all staff following any updated guidance | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** | * Staff to read, understand and follow Protective Measures Procedure – working document so this will need to be reviewed and updated and shared with staff and parents when PHE/DfE/Government information and advice from BHCC is sent out. |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **3.1** | **Staff not up to date with PHE/Government/DfE & BHCC advice/guidance continued** | Staff or children may risk exposure to virus if staff are not aware of relevant guidance | * Agreed methods of communication – e.g. Famly * All staff to ensure that nursery have an up to date mobile number * Managers have updated contact list for all members of staff | **1**  **1**  **1** | **1**  **4**  **4** | **1**  **4**  **4** |  |  |  |  |  |
| **4.** | **STAFFING** | | | | | | | | | | |
| **4.1** | **Reduced staffing structure/insufficient supervision ratios/trained paediatric first aiders/ qualified staff to work with children with complex behavioural/medical/emotional needs** | Children may risk injury. Staff at work may suffer increased stress | * All Paediatric First Aid and Designated Safeguarding Lead requirements are to be met: [LINK](https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2) * 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. | **1**  **1** | **4**  **4** | **4**  **4** |  |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **4.1** | **Reduced staffing structure/insufficient supervision ratios/trained paediatric first aiders/ qualified staff to work with children with complex behavioural/medical/emotional needs continued** | Children may risk injury. Staff at work may suffer increased stress | * Manager to establish daily supervision levels and to ensure staffing requirements are met. Inform Ofsted and the Family Information Service if the setting needs to close. * Manager to ensure that there are adequate paediatric first aiders in-line with HSE guidance, certificates extension periods and changes to paediatric first aid requirements under EYFS. * Manager to check first aid cover each day * Ensure trained staff available to support children with additional needs. | **1**  **1**  **1**  **1** | **4**  **4**  **4**  **4** | **4**  **4**  **4**  **4** | Manager to disclose Company’s mandatory training spreadsheet to Ofsted if required to do so to show staff training history and compliance with required qualifications |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **5.** | **EXTERNAL SERVICE PROVIDERS** | | | | | | | | | | |
| **5.1** | **Chefs unable to provide meals or operating a reduced service** | Children at risk of missing a meal | * All Managers and Deputy Managers are qualified to Level 2 food safety and hygiene and can be released from current role to cover chefs if unwell | **1** | **1** | **1** | * All meals provided by setting so no child will miss a meal |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **6.** | **EMERGENCY EVACUATION & FIRE** | | | | | | | | | | |
| **6.1.** | **Staff and children unable to evacuate the building safely** | Injury to children or staff | * In case of fire or fire alarm activation, everyone to use their nearest available exit route, even if a one-way system has been developed for day-to-day attendance * Any doors in the setting that are heavily used may be held open using ‘dorgards’ or magnetic catches linked to the fire alarm to enable them to close when the alarm activates.  Fire resisting doors should not be held open by using wedges or other equipment. ‘Dorgards’ are used in our nursery setting. | **1**  **1**  **1** | **4**  **4**  **4** | **4**  **4**  **4** |  |  |  |  |  |

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| **What are the significant, foreseeable, hazards?**  ***(the dangers that can cause harm)*** | | Who is at Risk? | **Current control measures**  ***(What is already in place/done)*** | **Risk Rating** | | | **What additional controls will be put in place to reduce the risk further**? | **Revised Risk Rating** | | | **Sign as done** |
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| **6.1.** | **Staff and children unable to evacuate the building safety continued** | Injury to children or staff | * Staff to be informed of all changes to the fire evacuation procedures (if any changes have taken place) A fire drill is recommended, to practise the old/new routes * Arrangements that may be in place for children or staff who need assistance in evacuating the building should be reviewed, to ensure that they still function with any new arrangements or staffing changes | **1**  **1** | **4**  **4** | **4**  **4** | * Currently our fire procedures will remain the same with as much social distancing as possible without impacting on the safety of the staff and children. |  |  |  |  |
| **6.2** | **Policy and Procedure** |  | **Policy and Procedure**  A detailed Covid-19 Protective Measures Policy has been written and distributed to all staff and parents. This is based on guidance received from the following Government documents:  **Covid-19 Co-ordinators**   * The Covid-19 Core Staff team are Covid-19 Co-ordinators and will be responsible for supporting all staff in their team and children to understand and follow the guidance in the Policy and Procedure document. | **1** | **4** | **4** | * The Covid-19 Co-ordinators are staff that have been working at Fizzy Fish with key worker and vulnerable children during lockdown and have the most knowledge of all the procedures in place to keep all staff and children safe and well. |  |  |  |  |
| **List of key Government guidance**   * [Actions for educational and childcare settings](https://www.gov.uk/government/publications/actions-for-educational-and-childcare-settings-to-prepare-for-wider-opening-from-1-june-2020) * [Implementing protective measures in education childcare settings](http://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings) * [Information for parents and carers](https://www.gov.uk/government/publications/closure-of-educational-settings-information-for-parents-and-carers) * <https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people> * <https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe> * <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2/early-years-foundation-stage-coronavirus-disapplications> * <https://www.gov.uk/government/publications/managing-school-premises-during-the-coronavirus-outbreak/managing-school-premises-which-are-partially-open-during-the-coronavirus-outbreak> * <https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm> * <https://dfemedia.blog.gov.uk/2021/02/01/mental-health-resources-for-children-parents-carers-and-school-staff/> | | | | | | | | | | | |