# Risk Assessment

**Staff and children returning to Kelton Nursery**

**Key:**

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| 1. Minor Injury = Abrasions, bruising, minor burns (reddening of the skin). |
| 2. Significant Injury = Lacerations leading to blood loss, secondary burns (leading to blistering), sprains & strains, muscle & ligament injury, minor head injuries. of underlying conditions i.e. asthma, epilepsy, bronchitis, diabetes, hyper/hypothermia.Acute representations |
| 3. Serious Injury = Fractures, trauma leading to significant blood loss, head injuries leading to periods of unconsciousness. |
| 4. Major Injury = Multiple fractures, spinal or cervical injury, multiple trauma, injury affecting respiratory system, head injuries leading to significant periods of unconsciousness. |
| 5. Major Incident/Fatality = Single or multiple fatality or large numbers of injuries in cat 3-4. |

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| **Severity** | | **Likelihood** | |
| 1 | Minor injury | 1 | Unlikely |
| 2 | Significant injury | 2 | Possible |
| 3 | Serious injury | 3 | Highly possible |
| 4 | Major injury | 4 | Probable |
| 5 | Major incident/fatality | 5 | Certainty |

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| Severity x Likelihood = Risk | 1 | 2 | 3 | 4 | 5 |
| 1 | 1 | 2 | 3 | 4 | 5 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 5 | 5 | 10 | 15 | 20 | 25 |
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|  | **Risk** |  |  |  |
|  | **Acceptable** | |  |  |
|  | **e with** |  |  |  |
|  | **Adequate** | |  |  |
|  | **Control** |  | **Unacceptable** | |
| **Acceptable Risk** | **Measures** | | **Risk** |  |

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| Hazard | Who is at risk | Risk rating (no control measures) | | | Control measure | Risk rating (with control measure) | | | Additional controls | Review date | |  |
|  |  | S | L | R |  | S | L | R |  | |  | |
| **Families will pick up and drop off at the same time increasing the risk of contracting COVID 19**   * A number of people dropping off and picking up children accompanied by siblings, increasing the risk of contracting COVID. * No knowledge of family’s current health or COVID status. * Health and hygiene not maintained. * Non-essential travel and social interaction guidelines not followed by staff and families increasing risk of COVID. * Families not making us aware of child having had medication. * Enough staff in to ensure children can adapt easier to routine changes during drop off and collection. | Parents, children and staff | 5 | 2 | 10 | * Families to be aware of social distancing when dropping off and picking up, by following social distancing guidance within the nursery. Staggered times will be allocated. * Only children who are symptom free or have completed the required isolation period attend the setting. * Staff member will collect the child from the parent at the door and accompany them to the room. * On arrival at the Nursery, it is reasonable to ask if parents, children or any member of the household have any of the symptoms of COVID-19 (high temperature or a persistent cough). If the answer is yes, they should not be allowed to leave their child at the setting. The child cannot return until a negative test result has been confirmed and agreed return with nursery or current isolation guidelines followed. * No toys, teddys or blankets (or similar) to be brought in from home. * Parents to be asked daily declaration changes. * Staff to complete temp checks on children prior to them entering the setting. * Children to enter the setting and staff take them to wash hands thoroughly on arrival at the setting, when changing rooms and before eating. * Encourage children to avoid touching their face, eyes, nose and mouth. * All children coming to the setting should avoid all non-essential public transport travel, and outside of setting hours, follow national guidelines for social interaction. * Any child who has been told to shield or who is clinically vulnerable cannot attend the setting unless government guide says otherwise. * Any child who has taken any form of paracetamol or ibuprofen will not be allowed into preschool for 48hours after symptoms have ended. * Any child who displays signs of a cold will not be allowed in preschool until 48hours after symptoms have ended. * Only parents who are symptom free and or have completed the required isolation periods will be able to drop off or collect their child. * Aim to limit drop off and pick up to 2 adults per family. * Automatic Sanitiser, paper towels, tissues available at entrance. * Notices around the building advising good hygiene practice. * Parents to ring the room on drop off and when picking their child up. Staff member will bring/meet the child to the door. * All cleaning and infection control protocols to be followed * Consistency in staffing to be managed by ensuring full time staff return to the nursery first, followed by part time staff. | 5 | 1 | 5 |  | |  | |
| **Contracting COVID due to the grouping of children within the setting**  Staff mixing with different staff and groups of children leading to cross contamination. | Staff and children | 5 | 2 | 10 | * Children’s are organised into rooms dependent on age and ability. These will be reviewed when information gathered from parents informs us of the numbers of children requiring childcare. * Bubble groups will be implemented in rooms * Care routines including provision of snacks should be within the space allocated to each “bubble” * Staff will stay with children with their bubble and room, and not move around the nursery unless absolutely necessary to maintain legislation or safeguarding, if a staff member needs to move to a different area then it must be agreed with management. * The use of communal internal spaces should be restricted as much as possible. * Outdoor spaces will be sectioned off to enable children to remain in their bubbles when using the garden area. * Return will be gradual in age and stages of children, to enable adjustment for staff and children. Starting with pre-school and keyworker children. * Health and safety of the building to be monitored and garden tidy up and checked prior to using. | 5 | 1 | 5 |  | |  | |
| **Risk of contracting COVID due to play and learning arrangements which do not allow social distancing.**   * Children attending more than one setting. * Social distancing not being maintained. * Parents gathering outside. * Children not understanding health and hygiene measures. * Children’s wellbeing not maintained. | Children and staff | 5 | 2 | 10 | * Implement social distancing where possible using small groups or bubbles * Children who attend different early years settings are not currently allowed to attend Kelton in line with the government guide. (this does not apply to after school children) * Parents encouraged to leave the site promptly after dropping off children. * Minimise the resources available to those that can be cleaned effectively. (remove sand, water and play dough unless playdough is made and monitored for individuals. * Ensure children wash hands regularly, throughout the day, as well as before eating, after coughing or sneezing. * Be responsive to children’s wellbeing, and their ability to manage the change. Communicate processes effectively with parents to ensure they understand the changes in place. * Deputy available to ensure parents leave the setting promptly when dropping of and picking children up. * Staff awareness of children needing more reassurance. * Follow current guidance on changes to EYFS, relevant to Covid 19 response * Families should make arrangements for their child to attend only one setting. | 5 | 1 | 10 |  | |  | |
| **Toileting and cleaning up of accidents, leading to COVID contamination** | Children and staff | 5 | 2 | 10 | * Children should be supported to do as much for themselves as possible.      * Limit number of children using sinks and toilets using restriction lines. For example close off toilets and sinks to enable them to be cleaned more regularly. * Children should not attend if unwell. * If an accident happens and whilst it is dealt with no one else should use the bathroom. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else. * Children must be accompanied when using the toilet to ensure prompt cleaning and limit contact between children in bathroom. * Additional staff in each room to support cleaning. * Additional cleaning of bathroom areas to take place, for example full clean down and mop before snacks and lunch. | 5 | 1 | 10 |  | |  | |
| **Child displays symptoms of COVID leading to possible further infections** | Staff and children | 5 | 2 | 10 | * Continuous cough or a high temperature, they should be sent home to isolate and have a covid test. * A child awaiting collection should be moved, if possible and appropriate, to a room where they can be isolated behind a closed door. If it is not possible to isolate them move them to an area which is at least 2 metres away from other people. A window should be opened for ventilation. * If they need to go to the bathroom while waiting to be collected, the bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else. * If a member of staff has helped someone who displayed symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. * Management to decide who is to accompany the child whilst awaiting pick up, however this would normally be a member of staff that has already cared for the child. * If clinical advice is needed, the setting staff, parent or guardian should go online to NHS 111 (or call 111 if they don’t have internet access) * REMEMBER CHILDREN DO NOT GET INFECTION OR SPREAD COVID THE SAME WAY AS ADULTS DO. * RIDDOR procedures to be followed. | 5 | 1 | 5 |  | |  | |
| **Staff spreading COVID whist attending the nursery** | Staff and children | 5 | 3 | 15 | * Staff should only attend the Nursery if they are symptom free, have completed the required isolation period or achieved a negative test result. * Risk assessing with regular health questionnaires for returning staff. * Consideration should be given to limiting the number of staff in the Nursery at any one time to only those required to care for the expected occupancy levels and cleaning requirements on any given day. * All staff coming to the setting should avoid all non-essential public transport travel, whenever possible and outside of setting hours, should minimise social interactions, as per the national guidelines. * Staff lunches may need to be staggered, and rest areas changed to ensure social distancing measures can be met. * Practitioners should receive clear communication regarding the role they play in safe operating procedure and all measures being taken to ensure the safety of the children and themselves. All restarting staff will receive an information sheet re procedures that have changed re covid. * Staff to be vigilant on health and stay away if unwell. * Testing is available to all key workers and their households. * Current government guidance to be followed. * Practitioners to receive a copy of risk assessment documents before return. Once the staff member has returned the staff member would be responsible to ensure they keep updated with the weekly review of the risk assessment, which can be found in the room baskets by the office or on the website * If a staff member or child becomes infected by COVID and this infection can be traced to the setting a RIDDOR report should be completed. * Staff requested to wear uniform and clean daily, if this is not possible the rules on uniform to be relaxed and staff allowed to wear their own clothes. * All staff and children that been in contact with someone that has been confirmed with having Covid-19 will be required to isolate immediately in line with the Government guidelines for 14 days. * The individual confirmed with the case will also have to isolate for 10 days. | 5 | 2 | 10 |  | |  | |
| **Visitors to the setting spreading COVID** | Staff and children | 5 | 2 | 15 | * Attendance to the setting should be restricted to children and staff as far as practically possible and visitors should not be permitted to the nursery unless essential (e.g. essential building maintenance or unsettled child). * Where essential visits are required these should be made outside of the usual nursery hours where possible or limited to areas which can be fully cleaned after use. * All committee involvement, should where possible, be conducted via virtual conferencing such as zoom. | 5 | 1 | 10 |  | |  | |
| **Travel arrangements by staff and parents leading to increased risk of contamination** | Staff and children | 5 | 2 | 10 | * Wherever possible staff and parents should travel to the nursery using their own transport. * If public transport is necessary, current guidance on the use of public transport must be followed | 5 | 1 | 5 |  | |  | |
| **New/ unsettled child coming into the building** |  | 5 | 3 | 15 | * Settling in will be done in the garden area were possible, each room will also have an allocated base for parents to come in and sit with their child while staff encourage the child to relax and feel reassured. * Baby room base will be the lending library, cottage/puddle/ snowdrop and bluebird base will be the literacy hut and buttercup and rainbow room will be rainbow room as its not in use. * Each base /area will be sanitised before and after use, parents will be asked to hand sanitise and will be required to complete an online application and health declaration. * The nursery management team will be responsible for signing visitors in and out of the building. * Settling in sessions will be reduce and limited to two 1 hour’s sessions in-line with the above procedure. * All parents will be required to ring the setting upon arrival. | 5 | 2 | 10 |  | |  | |
| **Children who may regularly spit or require physical contact** | Staff and children | 5 | 2 | 10 | * If non-symptomatic children present behaviours which may increase the risk of droplet transmission (such as biting, licking, kissing or spitting) or require care that cannot be provided without close hands-on contact, they should continue to receive care in the same way, including any existing routine use of PPE.   In these circumstances, to reduce the risk of coronavirus (COVID-19) transmission, no additional PPE is necessary as these are non-symptomatic children in a non-healthcare setting and so the risk of viral transmission is very low. However, additional space and frequent cleaning of surfaces, objects and toys will take place. Cleaning arrangements will be increased in the child’s room base, with a specific focus on surfaces which are touched a lot. | 5 | 2 | 10 |  | |  | |
| **Individuals (e.g. children) spreading COVID whilst attending the setting.** | Staff and children | 5 | 3 | 15 | * Individual's should only attend the Nursery if they are symptom free, have completed the required isolation period or achieved a negative test result. * Children will be asked upon arrival if there are any changes to their health declaration. * Children will remain in small, consistent rooms where possible, to avoid contact with numerous individuals, minimising the risk of spreading the virus. * Children, when possible will remain with consistent staff to also minimise the risk and contact with others. * if there is a confirmed COVID case within a specific room, staff and children will be required to isolate in line with the Government guidance and a full deep clean of the communal and room spaces will begin. | 5 | 2 | 10 |  | |  | |
| **Travelling abroad or to areas in the UK that have different lockdown measures in place.** | Staff and Children | 5 | 4 | 20 | * + Whenever possible all individuals should not travel abroad if other arrangements can be made e.g. booking can be moved etc.   + Non-essential international travel should not be made.   + At all times Government guidelines must be followed and individuals must not attend areas that have been classified as ‘unsafe’ or are exempt.   + Government guidelines will be followed- if an area/place is placed on lockdown when you are away and new quarantine measures will be adhered to.   + Parents/carers must inform the staff if they have been away via telephone before returning to the setting.   + This risk assessment is subject to change at any time to ensure we adhere to any Government changes. | 5 | 2 | 10 |  | |  | |
| **Re opening of after school and bus run collections** |  | 5 | 3 | 15 | Ensure that a bubble of children reaches no more than 15 children in each group/area used.  Group children from the same classes near each other on the bus route.  Carry out two pick up collections rather than one to ensure children have space between them  Ensure children are prioritised as stated in the guidelines- children from early years/reception/year 1/and year 6 as well as children of critical worker. | 5 | 2 | 10 |  | |  | |
| **Member of the management team working together and testing positive to covid** |  | 5 | 3 | 15 | Management team to work in separate areas, and not be in the same room for more than 15 minutes. | 5 | 1 | 5 |  | |  | |
| **Local lock down put in place due to covid spread** |  | 5 | 4 | 20 | Keep updated on local lockdown daily  <https://www.gov.uk/guidance/north-west-of-england-local-restrictions-what-you-can-and-cannot-do#affected-local-areas>  **Social contact**  If you live in one of the affected areas, in order to help prevent the spread of coronavirus, you should not:   * meet people you do not live with inside a private home or garden, except where you have formed a support bubble (or for other limited exemptions to be specified in law) * visit someone else’s home or garden even if they live outside of the affected areas * socialise with people you do not live with in other indoor public venues – such as pubs, restaurants, cafes, shops, places of worship, community centres, leisure and entertainment venues, or visitor attractions. You may attend these venues with people you live with (or are in a support bubble with), but should avoid interaction with individuals or groups from other households. If you run such a business or organise events on their premises, you should take steps to ensure people do not interact with people they do not live with, in line with COVID-19 secure guidance * visit friends or family in care homes, other than in exceptional circumstances. Care homes should restrict visits to these circumstances | 5 | 2 | 10 |  | |  | |
| **Local spike in covid cases** In response to an increase in confirmed coronavirus cases in the Princes Park area, which includes parts of Toxteth, Dingle and the Canning area close to the city centre, |  | 5 | 3 | 15 | If members of Kelton live in this area, they can get tested in the Pop-up walk-in testing centres which are open every day of the week at:   * **Princes Park Health Centre, 13 Bentley Rd, L8 0SY (enter via the car park off Kingsley Road) from 9am-4pm** * **PAL Multicultural Centre, 68A Mulgrave St, L8 2TF from 10am-4pm**   Measures have been put in place under Liverpool city council and will be reviewed on 14th  Advice for residents in the area   * follow the advice and guidance around social distancing * wear face coverings in confined spaces, supermarkets and on public transport * maintain social distancing with members of the same family who are from a different household * not to visit other households unless the visit is essential - and if the visit is essential stay at least two metres away from anyone from a different household * not stay overnight in a household you don’t live in   People who have been shielding up until 31st July 2020 have also been advised that they need to continue to protect themselves from risk by staying at home as much as possible and minimising their social | 5 | 2 | 10 |  | |  | |
| **Not monitoring covid symptoms in the setting** |  | 5 | 3 | 15 | Staff members to ensure they record any symptoms of children’s illness and feed it back to management at the senior meeting. Manager to monitor any confirmed or potential covid cases. | 5 | 2 | 10 |  | |  | |
| **Children with additional needs that may need additional support** |  | 5 | 3 | 15 | Senior staff/ child’s keyworker and senco if they are involved, to create a risk assessment re support needed.  Risk assessment to be monitored by the Senco  One to one support if needed. | 5 | 1 | 5 |  | |  | |
| **Staff covering lunches in different rooms, all in contact may have to isolate if there is a confirmed positive.** |  | 5 | 3 | 15 | Staff will be assigned to each room to ensure there is a reduced risk, if a assigned staff member is not available we will use an additional staff member, who will wear ppe and also try and arrange cover whilst the children are in the garden area. | 5 | 1 | 5 |  | |  | |
| **Potential second spike and being prepared** |  | 5 | 2 | 10 | Monitor and follow government guide daily.  Monitor children and staff illness daily.  Ensure a list of keyworkers and vulnerable children is drawn up and ready for use.  Ensure a plan of communication is ready with time scales.  Ensure access to connect is available on managers/deputy’s laptops if needed to access staff and children’s contact numbers.  Create a tick chart of what will be needed to work from home if setting must close.  Create a file for covid records to ensure everything is in one place, ensure a criteria list is created  Ensure necessary suppliers are cancelled and contracts are renewed.  Individual risk assessments to be completed on staff to enable quicker decisions to be made.  Seek and record advice from public health if a child is confirmed with covid  Stop out of hours visits unless vital to safety.  Reduce opening times and review time slots.  Create records of all individuals dropping and colleting children.  Reduce bubbles back if necessary. | 5 | 1 | 5 |  | |  | |
| **Not understanding definitions of Covid** |  | 5 | 3 | 15 | |  |  | | --- | --- | | **Confirmed Case** | Laboratory confirmed case of COVID-19,  whether symptomatic or asymptomatic | | **Suspected Case** | A case with symptoms suggestive of COVID-19  and no laboratory confirmation   * fever over 37.8, or * new continuous cough, or * loss or change of sense of smell or taste | | **Close contact (GOV.UK definition)** | Close contact means:   * having face-to-face contact without * personal protective equipment (PPE) with * someone (less than 1 metre away), includes * being coughed on, or, a face to face * conversation, or unprotected * skin to skin contact * spending >15 minutes without PPE within * 2 metres of someone * travelling in a car or other small vehicle * e without PPE with someone * (even on a short journey) * or close to them on a plane   within 48 hours prior to suspected or confirmed case  developing symptoms, or, of positive test if case is  asymptomatic, to 7 days after onset of symptoms,  or, of date of test (if case is asymptomatic).  A person who wore appropriate PPE or maintained  appropriate social distancing (over 2 metres) would  not be classed as a contact. | | **Household contact** | A person who lives with or spends significant  time in the same household as a possible or  confirmed case of coronavirus (COVID-19).  This includes living and sleeping in the same home,  anyone sharing kitchen or bathroom facilities, or sexual  partners. | | **Outbreak of COVID-19** | An outbreak is defined as 2 or more cases that  have tested positive for coronavirus (COVID-19) within  the same 14-day period, in people who either work or  have visited a setting.  In a residential care setting the definition is 2 or more  symptomatic cases (or laboratory confirmed) within the same 14 day period. | | **Vulnerable people** | Clinically extremely vulnerable people –  People defined on medical grounds as clinically  extremely vulnerable, meaning they are at the  greatest risk of severe illness from coronavirus.  This group includes solid organ transplant recipients,  people receiving chemotherapy, renal dialysis patients  and others. | | Clinically vulnerable people –  Similar cohort to those who require an annual flu  vaccination due to increased risk of serious illness  from flu, e.g. pregnant women, over 65s,  people with underlying medical conditions. | | Vulnerable people (non-clinical) –  There are many individuals and groups who are more  vulnerable for social or environmental reasons to the  impact or consequences of COVID-19 in its widest  sense, e.g. they may less able to protect themselves  from infection, or at increased risk of harm due to  COVID-19 control measures, or less able to abide  with control measures. | | 5 | 1 | 5 |  | |  | |

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| **Water play in the rooms** |  | 5 | 4 | 20 | * Children should be supported to wash their hands before and after play in the water * Limit number of children in the water area to a group of 3 children. * Change the water both AM and PM. * Children should not attend if unwell. * Ensure fresh water daily. * Soap in the water. * Staff to monitor the water area. | 5 | 2 | 10 |  |  |

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| **Reducing resources e.g. pens in the room/areas** |  | 5 | 3 | 15 | * Staff to clean resources daily * Children should not attend nursery if unwell and if they develop symptoms should not touch any resources and isolate. * Staff to ensure all pens are accessible with a tub for pens that have been used for children to put in to ensure one pen is not being used numerous times by different children. * Staff to clean the used pens before returning to the allocated pots or baskets. |  |  |  |  |  |
| **If a child’s parent or carer tests positive for COVID potential risk of spreading through the child due to contact.** |  | 5 | 4 | 20 | * The child is to immediately isolate for 14 days in-case they develop any symptoms * The parent or carer will be asked to see if their child can be tested as a precaution * 119 on 27.08.2020 have advised the setting does not need to isolate the ‘bubble’ where the child has been unless the child has been confirmed with coronavirus. Staff are also able to move to different rooms if there are no symptoms however as a precaution the management team where possible will not allow this unless necessary. * The room the child has been in must be deep cleaned, all toys, units and clothing/soft furnishings. * Children and staff to move when able to a different room to ensure room can be fully cleaned and to prevent children from touching any further toys/equipment. * Staff who have been in contact with the child or family will remain only in their bubble and remain in the set areas given * Staff will stay in the room until the end of the week in-case any further symptoms develop and to allow the weekend in-between. * Staff are to not be in contact with any parent or carer for more than 15 minutes. * Staff are to only see parents at the main door outside for collection and drop offs. * Any familiarisation sessions can take place however if the parent or carer is longer than 15 minutes 2 meters distance must be adhered to. * Only parents or carers who have children in the ‘bubble’ who are high risk are to be informed to provide opportunity to seek advice if they require. | 5 | 2 | 10 |  |  |