**Covid-19 risk assessment for schools and childcare settings**

**Guidance for Ealing schools and childcare settings completing risk assessment**

Most people who become infected with COVID-19 will experience **mild symptoms, such as fever and cough and are unlikely to become severely unwell**.

Based on the current knowledge of COVID-19 infection and transmission, children are **unlikely** to experience severe illness. Deaths in children due to COVID-19 have been **extremely rare**. Guidance on educational settings developed by the Association of Directors of Public Health and London Councils states that for these reasons, “[children’s settings are currently perceived to be **low risk**.”](about:blank)

The decision to prioritise younger children in opening schools and childcare is based on the evidence suggesting that younger children are less likely to become unwell if infected with COVID-19, and the evidence of the adverse impact that time out of school/childcare can have on their learning, development and well- being. The effectiveness and risk of actions such as opening or closing schools and childcare is therefore balanced against their impact on society, and the holistic health needs of the population.

Evidence suggests that when children are out of school/childcare there are **negative impacts** on their physical and mental health. Children are **less likely** to be physically active, to maintain a healthy weight, and to have positive mental health and wellbeing. Children who are out of school are also **more likely** to be affected by educational and social developmental deficits, and this is likely to have the greatest impact on those who have the least resources or who are most vulnerable.

The following actions for staff and children contribute to reducing the likelihood of COVID-19 transmission, and the severity of the impact:

* [Washing hands](about:blank) frequently for at least 20 seconds, using soap and water, or hand sanitiser where soap and water are not immediately available;
* Coughing or sneezing into tissues before binning them;
* Avoiding touching the eyes, nose or face;
* [Cleaning](about:blank) and disinfecting regularly touched objects and surfaces using regular cleaning products;
* Ensuring that if staff, children (or anyone in their household) develop symptoms of COVID-19, they stay at home and follow guidance on [household isolation](about:blank);
* Ensuring that if staff or children are at higher risk of illness from COVID-19 because they are clinically vulnerable (i.e. eligible for a flu vaccine) or extremely clinically vulnerable (i.e. shielding), they are supported to stay at home and follow guidance on [social distancing](about:blank) or [shielding](about:blank) as appropriate;
* Following government advice and guidance on actions for [educational and childcare settings to prepare for wider opening](about:blank).

If the above advice is followed carefully, any risk of transmission in schools and childcare settings will be greatly reduced.

**This Risk Assessment should be completed in conjunction with the guidance above and with schools Initial Planning Framework**

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| **School/Childcare Setting:**  l_logo**Bumble Bees Day Nursery** | | | | **School/Childcare Setting address:**  **21 Inglis Road**  **Ealing**  **W5 3RJ** | | **Review Date:**  (This is a dynamic document and should be reviewed and updated if there are any changes) | | | C:\Users\EmerySu\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\VZ3ZBGDO\Ealing_Logo_Colour_CMYK[1].jpg | | |  |
| **Assessment Dates:**  **01/06/2020, 08/09/2020**  **15/12/2020,** | | | | **What/who is being assessed?**  Biological hazard- Covid-19 within educational settings | | | | | | | |
| **Name of Assessor:** | | | | **Rajbir Sangha** | | **Responsible Person for Actions:** | | | **Rajbir Sangha** | | |
| **Task / Activity Area** | **Hazard** | **Who might be harmed and how?** | **What are your existing controls?**  *LT’s/Managers/owner’s to write what is being done now and then refer to Recommended controls:*   * *Possible controls for consideration to be adapted or deleted as necessary* | | **Recommended Control Measures**  *LT’s/Manager’s/owners to move Recommended Controls into Existing Controls once they have been implemented:* | | **Action by who/when?** | **Likelihood of occurrence after recommendedcontrols added (L)**  **1-Very Unlikely**  **2-Unlikely**  **3- Possible**  **4- Likely**  **5- Very Likely**  **Likelihood =** Probability of occurrence based on specific activity being assessed | | **Impact (I)**  **1-Negligible**  **2- Minor**  **3- Moderate**  **4- Major**  **5- Extreme**  **Impact = Estimate of harm based on specific activity being assessed** | **Overall Risk**  **(L X I) + I**  **<10 = Low**  **10-19 = Medium**  **20-30 = High** | | |

| **Task / Activity Area** | **Hazard** | **Who might be harmed and how?** | **What are your existing controls?** | **Recommended Control Measures** | **Action by who/when?** | **Likelihood of occurrence after recommended controls (L)** | **Impact (I)** | **Overall Risk**  **(L X I) + I** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Entering the childcare provision | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and, in rare cases, even death | *• Stagger drop-off and collection times*  *• Parents not to enter childcare provision site*  *• Entry into childcare provision should be direct into classrooms where possible*  *• Children to be accompanied by only one parent*  *• No visitors* | * Minimising contact with individuals who are unwell by ensuring that those who have coronavirus symptoms, or who have someone in their household who does, do not attend childcare settings or schools. * On entry to the building, staff and children to wash their hands with soap and water for at least 20 seconds and hands dried or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered. * [Government guidance](about:blank#personal-protective-equipment-ppe-including-face-coverings-and-face-masks) to be followed. | Leader ship team to plan drop off and collection times. Management to communicate procedures to parents | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Social distancing  Early Years  May be difficult in many scenarios | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Avoiding contact with anyone with symptoms*  *• Minimising contact and mixing of groups*   * *Consider how your premises can best be used to keep small groups of children together* * *Consider how room divides and floor markings can be used to keep groups apart*   *• Children and staff are always in the same small groups each day, and different groups are not mixed during the day, or on subsequent days*  *• Display social distancing poster at all entrances* | [Government guidance](about:blank) should be followed. This guidance includes practical ways to maintain social distancing (2 metres) for the Early Years setting. The Government acknowledges that social distancing in these settings is more difficult to achieve.  [Planning for early years and childcare settings](about:blank)  [Ensure you follow guidance for floor space requirements](about:blank)  The staff to child ratios within [Early Years Foundation Stage](about:blank) (EYFS) continue to apply.  The following hierarchy of controls to be used in all settings:   * Minimizing contact with individuals who are unwell by ensuring that those who have coronavirus symptoms, or who have someone in their household who does, do not attend childcare settings. * Cleaning hands more often than usual - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitizer ensuring that all parts of the hands are covered. * Ensuring good respiratory hygiene by promoting the ‘catch it, bin it, kill it’ approach. * Cleaning frequently touched surfaces often using standard products, such as detergents and bleach. * Minimizing contact and mixing by altering, as much as possible, the environment (such as classroom layout) and routines (such as staggered outdoor time). | Leadership team to arrange groups and staffing  Leadership team to display signage  Management to share procedures with staff | **3** | **3** | **(3X3) +3 =**  **12**  **(Medium)** |
| Cleaning and Hygiene | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Frequent hand cleaning and good respiratory hygiene practices*  *• Daily cleaning of classrooms and equipment*  *• Remove unnecessary items from classrooms and other learning environments where there is space to store it elsewhere, including soft furnishings that cannot be cleaned.*  *• Keep spaces well ventilated using natural ventilation (opening windows)*  *• Display hand washing poster at the entrances* | Follow the [COVID-19: cleaning of non-healthcare settings guidance](about:blank)   * Clean surfaces that children and young people are touching, such as toys, books, desks, chairs, doors, sinks, toilets, bannisters, etc. more regularly than normal | Key person to organise room and remove any nonessential equipment  Management to ensure that there is a consistent stock of anti-bacterial cleaning materials | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| School lessons/ activities | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of smell and taste or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Consider how you can plan the day to make maximum use of the outdoor space*   * *Consider how outdoor spaces can be partitioned so that individual groups do not mix* * *Consider the use of malleable play to ensure that these resources are not shared between children. Sandpits should not be used at this time.*   *• Use the routine and selection of room or other learning environment to reduce movement around the building.* | * Refresh the school/learning timetable, decide which lessons or activities will be delivered.   [Government guidance](about:blank#personal-protective-equipment-ppe-including-face-coverings-and-face-masks) to be followed.  [Planning for early years and childcare settings](about:blank) | Leadership team to arrange groupings  Key person to re-organise learning environments | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Lunch | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Stagger lunch times, so that all children are not moving around the building/bathroom at the same time.*  *• Before eating, children to wash their hands with soap and water for at least 20 seconds and hands dried or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered.*  *• Children are encouraged not to touch their mouth, eyes and nose* | * Lunch in the groups children are already in, groups should be kept apart as much as possible. * Consider one-way circulation or place a divider down the middle of the corridor to keep groups apart as they move through the setting where spaces are accessed by corridors. * Where possible, all spaces should be well ventilated using natural ventilation (opening windows) * Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding- setting and childcare settings will need to make a decision on this and seek advice where needed), to limit use of door handles and aid ventilation.   [Government guidance](about:blank#personal-protective-equipment-ppe-including-face-coverings-and-face-masks) to be followed.  [Planning for early years and childcare settings](about:blank) | Key person to arrange groupings for lunch in perspective areas  Management to ensure food deliveries through Tesco.  Cook to review menu to ensure it is suitable and food needed can be purchased | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Transport Arrangements | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Staff* *parents and children are encouraged to walk or cycle to their education setting where possible, or use private vehicles* | Schools, parents and children should follow the [Coronavirus (COVID-19): safer travel guidance for passengers](about:blank) | Management to share guidance with parents | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Dealing with suspected and confirmed cases of Covid-19 | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | • *Where the child, young person or staff member tests negative, they can return to their setting and the fellow household members can end their self-isolation.* | **Suspected cases:**  If a child, young person or staff member develops symptoms compatible with coronavirus, they should be sent home and the [stay at home guidance](about:blank) followed. If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people. If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.  There will be a mechanism for communicating with parents & other household members about the need to self-isolate. All staff and children who are attending the setting will have access to a test if they display symptoms of coronavirus and are encouraged to get tested in this scenario.  **Confirmed cases:**  If a child, young person or staff member tests positive, the rest of their class or group within their childcare or education setting should be sent home and advised to self-isolate for 10 days. The other household members of that wider class or group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms. [Government guidance](about:blank#personal-protective-equipment-ppe-including-face-coverings-and-face-masks) to be followed. | Management to identify a room and bathroom for isolation | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Use of PPE | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Individual child’s risk assessment and/or behavioural support plan to be reviewed and updated.*  *• Staff related risk assessments to be updated for those that are vulnerable, such as those who are pregnant* | PPE should be provided in the following cases:   * Children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs. In these cases PPE should continue to be used as normal. * If a child becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home, and a distance of 2 meters cannot be maintained. * Staff are provided with the face shields to always wear. Mask can also be used.   The following Government [video](about:blank) shows how PPE should be put on and taken off.  PPE should be disposed of in line with Government guidance on [cleaning in non-healthcare settings](about:blank).  [Government guidance on PPE](about:blank#how-to-work-safely-in-specific-situations-including-where-ppe-may-be-required) to be followed. | SENCO and SEN lead to complete risk assessments for individual children where required  Management to complete risk assessments for individual staff where requires | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Administering First aid/  Medication | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of smell and taste or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Setting have a suitable number of staff on duty*  *• Setting have a first aid risk assessment and medication policy in place* | *•* St John’s Ambulance [advice](about:blank) followed by first aiders during the Covid-19 pandemic.  *•* Guidance on the number of first aiders required provided [here](about:blank)  *• Administering first aid and medication risk assessments to be amended by nursery*  *•* [*Government PPE guidance*](about:blank#how-to-work-safely-in-specific-situations-including-where-ppe-may-be-required) *followed.* | Leadership team to review administering medication policies  Management to ensure a paediatric first aider is assigned to each grouping of children. | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |
| Leaving the setting | Biological hazard- Covid-19 | Staff, parents and children could become infected with COVID-19. If so, they are likely to experience mild symptoms such as fever, loss of taste and smell or cough. In severe cases, this could lead to acute respiratory syndrome respiratory symptoms, and in rare cases, even death. | *• Stagger drop-off and collection times*  *• Parents not to enter the setting .Parents are advised to wear masks at drop off and pick up.*  *• Children to be collected by only one parent* | * Movements of children to be staggered to maximise social distancing as per [Government guidance](about:blank). * Staff and children to wash their hands with soap and water for at least 20 seconds and hands dried or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered. * Temperature monitored and shoes sanitized. | Leadership team to plan drop off and collection times.  Management to communicate procedures to parents | **2** | **3** | **(2X3) +3 =**  **9**  **(Low)** |

