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| 1 | Limiting contact and the spread of the virus | COVID-19 | Staff  Children  Parents | M | M | M | Hygiene and infection control procedures followed for cleaning. Disposable PPE to be used for the higher risk jobs as normal – nappy changing and cleaning.  Training and meetings organised in a safe manner (phone, webinars, online, socially distanced).  Whole setting is one bubble including all staff.  Relaxed uniform introduced so that staff can change their clothes daily as the virus lives on clothing too.  Material face masks can be worn if staff choose to wear them, they must not be shared between staff and when washed ensure they are completely dry before use (these are not a substitute for the main government guidance of social distancing and washing hands. There is no medical evidence to suggest this is a preventative measure). | A |
| 2 | Environment | COVID-19 | Staff  Children  Parents | M | M | M | Staff to think about the layout of the room with tables and activities spread out. Maximise the use of the outdoor space (garden and front car park area with barriers).  Poster from NHS and government displayed through setting.  Pens, phones and tablets to be cleaned down after every use, using personal items only. Be aware the virus lives on cardboard for 24 hours, plastic and stainless steel 72 hours.  Continue to remove waste regularly from the building. Advice is to dispose of tissues down the toilet as this is the best way to reduce the risk, however ours often block and this could cause problems with the drainage and septic tanks so will be monitored.  Maintain good airflow throughout the space with open doors and windows ensuring children’s safety at all times.  Please make sure drinks are offered regularly throughout the day, preferably brought in from home. | A |
| 3 | Communication for staff | Information sharing of COVID-19 | Staff | L | L | L | Staff communication with on-going updates through email, text or What’s app. This includes government guidance, policies and risk assessment updates. Parent emails are shared with manager and/or staff.  Staff advised what symptoms to look out for in line with government guidance for COVID-19. | A |
| 4 | Communication to parents | Information sharing of COVID-19 | Staff  Children  Parents | L | L | L | Parent emails sent as and when government guidance changes and updates on setting’s guidance. A new emergency contact sheet created for use during the outbreak. Questionnaire sheet filled in to provide updated info on families health.  Staff will monitor temperatures throughout the day if they have any reason for concern.  Parents will be dropping off and picking up from the main door and staff will then sign the child in on the register. Staff will monitor social distancing whilst children are being dropped off to ensure this is being adhered to at all times. Staff will support children to wash their hands on arrival. | A |
| 5 | The vulnerable staff/children in the setting | COVID-19 | Staff  Children  Parents | H | M | H | Medication to be in sealed bags in the medication box so that there is no cross-contamination.  Anyone who is categorised as vulnerable, is recommended to self-isolate under government guidelines. | A |
| 6 | Isolating where possible | COVID-19 | Staff  Children  Parents | M | M | M | The setting will have a specific room or area designated for a child if they display any symptoms so they can be isolated from the other children, (preferably outside if weather permits or the small kitchen) and use the disabled toilets only if needed which will be thoroughly cleaned after use. If this is not possible then please ensure they follow the 2 meters rule from the other children/staff. Once the child is sent home the area would need to be deep cleaned. Government guidance will be followed with self-isolation, updated to 10 days rather than 7. Family members living with someone displaying symptoms must self-isolate for 14 days. | A |
| 7 | Good hygiene systems | COVID-19 | Staff  Children  Parents | M | M | M | It is key that staff are role modelling with the key NHS guidance – lots of washing hands, coughing in a tissue or in their arm. Posters displayed throughout the building in key areas.  Supervised handwashing – to be carried out on arrival to the setting, before and after food, after sport, after the toilet. Staff need to ensure that children have washed soap suds off their hands fully and hands are dried thoroughly to prevent sores and dry skin. Staff to monitor the dryness of children’s hands and discuss with parents if hand cream wants to be provided from home. This must be recorded in line with the medication policy.  Deep cleaning to be undertaken especially highly used areas such as door handles, phones, tablets. To be cleaned with antibacterial solution or Dettol all-in-one disinfectant. | A |
| 8 | Other hall users | COVID-19 | All hall users, cleaners, maintenance workers | M | M | M | If the hall is open for multiple use, systems and risk assessments need to be put in place by the village hall to ensure the safety of all. Their risk assessment will be shared with Busy Bees and ours with the hall. | A |

Key to result: T=Trivial risk A=Adequately controlled N=Not adequately controlled U=Unable to decide, further information required

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| **Risk Rating:** Once the likelihood and severity have been determined, the risk can be calculated below (AxB) | | | |
|  | **Likelihood (B)** | | |
| **Possible Severity (A)** | **L** | **M** | **H** |
| Low | Low | Low | Medium |
| Medium | Low | Medium | High |
| High | Medium | High | High |