NBCC Risk Assessment: Operation from 27th January 2022: response to Covid-19.

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Part A: Background and Context

Control measures in this risk assessment reflect government guidance for schools. As North Bristol Children's Centre (NBCC) operates on school sites the same considerations need to be adhered to. Therefore, where school is stated within this risk assessment this also includes the CC's setting.

This risk assessment has been developed with reference to:

- Schools Covid-19 operational guidance (updated 19 January 2022) Actions for schools during the coronavirus outbreak GOV.UK (www.gov.uk) .
- Actions for early years and childcare providers during the COVID-19 pandemic (updated 20 January 2022) <u>Actions for early years and childcare providers</u> <u>during the coronavirus (COVID-19) outbreak - GOV.UK (www.gov.uk)</u>
- Contingency Framework: Education and childcare settings (updated 21 January 2022) <u>Contingency framework: education and childcare settings GOV.UK</u>
 (www.gov.uk)

Rationale for guidance for schools from September 2021.

Government guidance has been developed on the premise that disruption to children and young people's education must be minimised. The <u>Evidence</u> <u>summary: COVID-19 - children, young people and education settings - GOV.UK (www.gov.uk)</u> sets out the evidence relevant to, and in support of, the government's decision to revise the guidance on the COVID-19 safe working and protective measures that have been used within settings, colleges and early years settings in England during the pandemic.

In making this decision, the government has balanced education and public health considerations – weighing the impact of these measures on teaching, educational attainment, the health and wellbeing of children, pupils, students and staff and the functioning of schools, colleges and early years settings, against the COVID-19 risks in a context that has now fundamentally changed due to the success of the vaccination programme.

The government continues to manage the risk of serious illness from the spread of the virus. The Prime Minister announced on 27 November the temporary introduction of new measures as a result of the Omicron variant and on 8 December that Plan B, set out in the autumn and winter plan 2021, was being enacted. As a result, these measures are reflected in this guidance for schools. This advice remains subject to change as the situation develops.

COVID-19 continues to be a virus that we learn to live with. NBCC's priority is to deliver face-to-face, high-quality support to all families.

As at 27th January 2022, we are adapting this risk assessment to take into consideration advice issued by their local Public Health Team and other updates relevant to our activities and experience in practice.

Contingency Planning

Government guidance requires settings to have an Outbreak Management Plan (sometimes called contingency plan) outlining how they would operate if any of the following circumstances applied to their setting or area:

- a COVID-19 outbreak within a setting
- if there is extremely high prevalence of COVID-19 in the community and other measures have failed to reduce transmission
- as part of a package of measures responding to a Variant of Concern (VoC)

This includes how we would ensure every family to receive the support to which they are normally entitled.

If necessary we will reinstate relevant control measures from our 2020-21 risk assessment to address the areas set out in <u>Contingency framework: education</u> and childcare settings - GOV.UK (www.gov.uk). Our contingency plan is named Sept 2021 NBCC Contingency Plan.

Control Measures

This risk assessment addresses the essential control measures set out in the government guidance referred to above. They are as follows:

Settings should:

- 1. Ensure good hygiene for everyone.
- 2. Maintain appropriate cleaning regimes.
- 3. Keep occupied spaces well ventilated.

4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.

We have adapted this risk assessment in consultation with relevant partners including trade union representatives where available. This risk assessment will be made publicly available to those who wish to see it.

Part B:

What is the Task/Activity or	What Hazards are present or may be generated?	Who is affected or	What Severity of Harm can	What Precautions (Existing Controls) are already in place to either eliminate or reduce the risk of an	What Likelihood is there of an	What is the Risk Rating ?
Environment you are assessing?				accident happening?		(See Table 2 and 3)

1: ENSURE GO	(Use a row for each one identified) OD HYGIENE FOR EVERYONE	exposed to hazards?	reasonably be expected? (See Table 1)		accident occurring? (See Table 1)	
1: ENSURE GO	Poor hand hygiene increases the likelihood of infection from coronavirus	Staff and visitors	Serious	 Opportunities are provided for everyone to clean their hands with soap and water and dry thoroughly: on arrival at setting after using the toilet before food preparation before eating any food, including snacks before leaving setting after sneezing/coughing. Covered bins available for disposal of paper towels will be emptied every day. Signage about how to wash hands properly, is on display. Where sinks are not easily accessible hand sanitiser will be available. 	Possible	Medium
Respiratory Hygiene	Poor respiratory hygiene increases the likelihood of infection from exposure to coronavirus.	Staff and visitors	Serious	Catch it, kill it, Bin it – tissues are available in all CC rooms, staffroom and reception at a minimum. The message is reinforced with families. Covered bins are available for the disposal of used tissues.	Possible	Medium
2. MAINTAIN A	APPROPRIATE CLEANING REG	IMES				
Cleaning All sites except Stoke Park are part of SLAs	Person contracts COVID 19 as a result of inadequate cleaning	Staff and visitors	Serious	Cleaning is part of the site SLA apart from at Stoke Park where CC staff do general cleaning. Cleaners should be adhering to https://www.gov.uk/government/publications/covid-19- decontamination-in-non-healthcare-settings	Possible	Medium

				 Where CC staff are required to undertake cleaning duties we will ensure that they have received appropriate training and are provided with PPE, as set out in guidelines above. We have identified cleaning of high-risk areas to be undertaken throughout the school day to include: Door handles Kettles Taps Switches Phones Laptops / Printers and photocopiers Staffroom/ food preparation Surfaces that staff/service users are touching e.g.: toys, books, chairs, tables, doors, sinks, toilets, bannisters, light switches, etc. As a minimum, frequently touched surfaces will be wiped down twice a day, and one of these should be at the beginning or the end of the working day. Cleaning will be more frequent depending on the number of people using the space, whether they are entering and exiting the setting and access to handwashing and hand-sanitising facilities. Cleaning of frequently touched surfaces is particularly important in bathrooms and communal kitchens. 		
Safe use of cleaning products	Inappropriate exposure to cleaning product results in allergic reaction/ poisoning etc Storage arrangements of cleaning product change increasing potential for unauthorised 'use' by pupils.	Staff and visitors	Serious	All staff involved in cleaning duties will receive training re: safe use and storage of cleaning materials. PPE will be provided for all cleaning activities. Safety data sheets for cleaning products are available. Only recommended cleaning products will be used.	Improbable	Low
	Use of hand sanitiser: potential for improper use and ingestion.	Staff and visitors	Serious	We are providing/allowing the use of hand sanitisers that contain at least 60% alcohol.	Improbable	Low

3 KEED OCCUP	IED SPACES WELL VENTILATE	D		Staff supervision provided as required We have obtained the Safety Data Sheet for the product(s). They advise on action to be followed if the sanitiser is not used as designed i.e., a child drinks some; it gets in eyes etc. This will also help with potential reactions to the product. We have and will secure adequate supplies of the product and provide it, especially in areas such as reception to the buildings.		
Ventilation (Open windows and doors are recommended as a means of improving air	Falls from height (open windows)	All premises occupants	Serious	Whilst taking into consideration the necessity to increase ventilation by improving air circulation within the building we have advised staff that window opening restrictors must not be removed.	Improbable	Low
circulation within the building)	Additional doors and windows are left open compromising site security/fire safety.	All premises occupants	Serious	We have reviewed our site and identified doors that could remain open without compromising fire safety/ and or security. Here, for high-risk areas such as kitchens and boiler rooms fire doors will be kept in the closed position. Lower risk rooms such as classrooms and offices may be propped open with removable things - a weight or wedge - if there are people present who will be tasked with removing it if the alarm goes off and at the end of the day. Door guards etc, will continue to be used to improve circulation in the building (and also reduce the need for touching the door handles).	Improbable	Low
	Inadequate ventilation contributes towards the	All premises occupants	Serious	We will ensure that our building is heated to a temperature whereby staff and pupils can work	Possible	Medium

	comfortably whilet and according to another that there
spread of coronavirus.	comfortably whilst endeavouring to ensure that there are measures in place to ensure good ventilation.
Open windows in the winter	
months mean that the	This will be achieved by a variety of measures
temperature in buildings is	including:
uncomfortable.	
	 natural ventilation – opening windows (in
	cooler weather windows will be opened just
	enough to provide constant background ventilation, and opened more fully during
	breaks to purge the air in the space). Opening
	internal doors can also assist with creating a
	throughput of air
	natural ventilation – if necessary external
	opening doors may also be used (as long as they are not fire doors and where safe to do
	so)
	We note the following advice from HSE:
	https://www.hse.gov.uk/temperature/thermal/manager
	<u>s.htm</u>
	https://www.cibse.org/coronavirus-covid-
	19/coronavirus,-sars-cov-2,-covid-19-and-hvac-
	systems
	NB: Minimum workplace temperature is 16 degrees
	centigrade.
	To balance the need for increased ventilation while
	maintaining a comfortable temperature, the following
	measures will also be used as appropriate:
	opening high level windows in preference
	to low level to reduce draughts
	 increasing the ventilation while spaces are
	unoccupied (e.g., during lunch, when a
	room is unused)

4. FOLLOW PUI	BLIC HEALTH ADVICE ON TES	TING, SELF IS	OLATION AND P	 providing flexibility to allow additional, suitable indoor clothing. Including advising staff re: the value of layering clothing. rearranging furniture where possible to avoid direct drafts 		
Engagement with the NHS Test and Trace Process. Access to testing	Failure to follow PHE/ NHS Test and Trace procedures increases the likelihood of exposure to coronavirus in the setting community.	Staff and visitors	Serious	Relevant staff understand the NHS Test and Trace process and how to contact their local Public Health England health protection team. Where necessary we will direct members of the setting community with symptoms of coronavirus to <u>Get a free</u> PCR test to check if you have coronavirus (COVID-19) - GOV.UK (www.gov.uk) Home test kits are available in our setting and will be offered in the exceptional circumstance that we believe an individual may have barriers to accessing testing elsewhere. We note that it is for settings to determine how to prioritise the distribution of their test kits in order to minimise the impact of the virus on the education of their pupils, and will therefore provide these to staff or pupils on the basis of an agreed set of criteria to be determined by the setting. https://www.gov.uk/government/publications/coronavir us-covid-19-home-test-kits-for-settings-and-fe- providers/coronavirus-covid-19-home-test-kits-for- settings-and-fe-providers We will ask staff and visitors to inform us immediately of the results of a test.	Possible	Medium
Contact with infected persons/ exposure to the virus within the setting.	Person contracts coronavirus as a result of direct contact with an infected person (or a symptomatic person) entering the premises.	Pupils and staff	Serious	Guidance has been issued to the entire school community. If anyone in the setting becomes unwell with a new and persistent cough or a high temperature, or has a loss of or change in, their normal sense of taste or smell (anosmia), they must be stay at home and are	Possible	Medium

advised to follow guidance for households with possible or confirmed coronavirus (COVID-19) infection: Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk) Note: The self-isolation advice for people with coronavirus (COVID-19) has changed. It is now possible to end self-isolation after 5 full days if you have 2 negative LFD tests taken on consecutive days. The first LFD test should not be taken before the fifth	
day after your symptoms started (or the day your test was taken if you did not have symptoms). The self- isolation period remains 10 full days for those without negative results from 2 LFD tests taken a day apart. From 14 December 2021, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 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.	
 Daily testing of close contacts applies to all contacts who are: fully vaccinated adults – people who have had 2 doses of an approved vaccine all children and young people aged 5 to 18 years and 6 months, regardless of their vaccination status people who are not able to get vaccinated for medical reasons people taking part, or have taken part, in an approved clinical trial for a COVID-19 vaccine Children under 5 years are exempt from self-isolation and do not need to take part in daily testing of close contact. 	

			Staff who do not need to isolate and have been identified as a close contact, should continue to attend work as normal.	
Contact with those developing symptoms of the virus during the working day.	Pupils and staff	Serious	If anyone in our setting develops COVID-19 symptoms, however mild, they will be sent home and advised to get a PCR test and follow public health advice. When to self-isolate and what to do - Coronavirus (COVID-19) - NHS (www.nhs.uk) Most recent guidance re: What to do if someone is displaying signs of coronavirus has been shared with relevant staff and is on display. If a family is awaiting collection, they will be moved, via a route involving the shortest possible internal distance (i.e., including an outside route where possible) if possible, to 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 will be opened for ventilation. If it is not possible to isolate them, we will 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, we endeavour that they will use a separate bathroom if possible. The bathroom will be cleaned and disinfected using standard cleaning products before being used by anyone else. In an emergency we will call 999 if they are seriously ill or injured or their life is at risk. We will not suggest a visit to the GP, pharmacy, urgent care centre or a hospital. Staff are instructed to wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. We will clean the affected area with normal household disinfectant after someone with symptoms has left to reduce the risk of passing the infection on to	Medium

				other people. See https://www.gov.uk/government/publications/covid-19- decontamination-in-non-healthcare-settings/covid-19- decontamination-in-non-healthcare-settings		
Lateral Flow Testing (Asymptomatic testing)	Non participation in Lateral Flow Testing means that asymptomatic cases are undetected within the setting community.	Staff and visitors	Serious	The opportunity for all adults in England to participate in lateral flow testing has been publicised amongst the setting community. <u>Regular rapid coronavirus (COVID-19) tests if you do</u> <u>not have symptoms - NHS (www.nhs.uk)</u> NBCC staff are participating in lateral flow testing twice per week at home.	Possible	Medium
				Confirmatory PCR tests We will follow the latest government guidance on confirmatory PCR tests in <u>Stay at home: guidance for</u> <u>households with possible or confirmed coronavirus</u> (COVID-19) infection - GOV.UK (www.gov.uk) following a positive lateral flow test.		
				We note that from Tuesday 11 January 2022 anyone in England who receives a positive lateral flow device (LFD) test result should report their result on <u>Report a</u> <u>COVID-19 rapid lateral flow test result - GOV.UK</u> (www.gov.uk) and must self-isolate immediately, but will not need to take a follow-up PCR test.		
				After reporting a positive LFD test result, they will be contacted by NHS Test and Trace so that their contacts can be traced.		
	Lateral Flow Testing process is not implemented correctly leading to inaccurate results and/or inadequate follow up of positive test results	Staff and visitors	Serious	NBCC staff have been advised to read the instructions on each new pack of lateral flow tests as the process varies between different packs.	Possible	Medium
Management of confirmed	Failure to follow PHE/ NHS Track and Trace procedures	Staff and	Serious	We note that close contacts of those testing positive with coronavirus will be identified via NHS Test and	Possible	Medium

cases of coronavirus	increases the likelihood of exposure to coronavirus in the setting community.	visitors		Trace. We note that we may be contacted in exceptional cases to identify close contacts. Records will be kept of all visitors with sufficient detail to support rapid contact tracing if required by NHS		
	Anxiety and dissent within the setting community			Test & Trace. We note the thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, whichever of these thresholds is reached first: • 5 children, pupils, students or staff, who are likely to		
				 a 10-day period; or 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period. 		
				We will seek public health advice if a staff member is admitted to hospital with COVID-19. Hospitalisation could indicate increased severity of illness or a new variant of concern.		
				Alternatively, we will call the Department for Education's existing coronavirus (COVID-19) helpline number on 0800 046 8687, and select option 1		
NHS COVID-19 App	Inadequate response to alerts provided by use of NHS COVID-19 App	Staff and visitors	Serious	We have informed all staff to inform another member of staff if they receive a notification during the day that they had been in contact with a positive case. The staff member will then put in place the setting's agreed process, including making appropriate arrangements for the member of staff to leave the setting at the earliest opportunity to begin self-isolation	Possible	Medium
				(if unvaccinated staff member). Where staff are required to keep their phones in lockers etc during the working day we have advised		

				them to turn the tracking off whilst they are not in close proximity to their phone.		
Containing any local outbreak	Person with symptoms of coronavirus refuses to isolate at home.	Staff and visitors	Serious	We will take the decision to refuse the person if, in our reasonable judgement, it is necessary to protect others from possible infection with COVID-19.	Improbable	Low
				Our decision will be carefully considered in light of all the circumstances and current public health advice.		
5. USE OF FACE	COVERINGS	1			I	
Use of face coverings	Failure to use face covering in areas where it is difficult to maintain social distancing increases the likelihood of exposure to coronavirus in the setting community.	Staff and visitors	Serious	Government guidance from 27 th January 2022 is as follows: In England, Face coverings are no longer required by law. The government suggests that you continue to wear a face covering in crowded and enclosed spaces where you may come into contact with other people you do not normally meet Face coverings: when to wear one, exemptions, and how to make your own - GOV.UK (www.gov.uk) NBCC staff are required to follow the guidance of the sites that the work at eg face coverings may need to be worn in communal areas. They are not required to wear face coverings while sat in NBCC rooms but can if they feel it is necessary. SLT have approved this approach. This approach has been explained to parents/carers before they visit the setting.	Possible	Medium
Safe wearing and removal of face coverings	Potential of contamination if face coverings are removed or disposed of incorrectly.	Visitors	Serious	Safe wearing of face coverings requires cleaning of hands before and after touching – including to remove or put them on – and the safe storage of them in individual, sealable plastic bags between use. Where a face covering becomes damp, it should not be worn and the face covering should be replaced carefully.	Possible	Medium

6. USE OF PERS	ONAL PROTECTIVE EQUIPME	E NT (PPE) (A fa	ace covering is not	Visitors should place reusable face coverings in a plastic bag they can take home with them and dispose of disposable face coverings in 'black bag' waste bin (not recycling bin). PPE because they are not designed to protect the wearer from	n infection from coro	navirus).
Use of Personal Protective Equipment (PPE) (Mainstream)	Incorrect use exacerbates the risk of further infection.	Staff and families	Serious	We have followed the advice of our employer, Bristol City Council. This means that we will not carry out activities on site that require PPE. Staff will only make home visits if they are essential and will wear appropriate PPE during the visit.	Improbable	Low
7: CHILDREN'S	CENTRE WORKFORCE	I	l		1	
Staff wellbeing	Staff anxiety re: potential exposure to the virus.	All staff	Serious	Where necessary Individual discussions are held with staff to identify concerns. (NB: recognising that some could be experiencing bereavement, mental health issues, etc.).	Possible	Medium
				EAP contact details have been shared.		
				Staff have regular meeting/supervision with an SLT member		
				Wellbeing tips shared amongst colleagues		
				HR advice is available if required.		
				<u>Talking with your workers about preventing</u> <u>coronavirus (COVID-19) - Stress, wellbeing and</u> <u>providing support (hse.gov.uk)</u>		
Staff training (including induction for supply teachers	Staff are not aware or do not understand the requirements for working safely.	All staff	Serious	In preparation for a full return on 1 September 2021 training and written instruction were provided re:	Possible	Medium

and other visiting staff).				 operating procedures outlined in this risk assessment to all staff. This includes: What to do if they suspect that they or a member of their household has coronavirus (including testing arrangements) Day to day organisations and procedures including arrangements for cleaning, Procedures to follow if they suspect that a child or adult in their group is displaying coronavirus symptoms Site security and fire safety including evacuation and lockdown procedures. Use of PPE (where applicable). 		
Individual staff requirements	Concerns from staff in identified work groups	Clinically extremely vulnerable	Fatal/ Major	We have taken note of government guidance updated on 24/12/21, namely: <u>Guidance on protecting people who are clinically extremely vulnerable from COVID-19 - GOV.UK</u> (www.gov.uk) We will discuss with employees who identify as CEV how they can be supported to carry out their duties in the workplace.	Possible	High
	Concerns from staff in identified work groups	Pregnant women	Serious	We will follow the specific <u>Coronavirus (COVID-19):</u> advice for pregnant employees - GOV.UK (www.gov.uk) NB Further guidance <u>Coronavirus infection and</u> pregnancy (rcog.org.uk).	Possible	Medium
Use of volunteers	Potential for the introduction of coronavirus into the setting	Staff and visitors	Serious	Volunteers may be used to support the work of the setting, as would usually be the case. All volunteers will be expected to follow our control measures to reduce the spread of coronavirus.	Possible	Medium

Management of expectations within the CC setting community	Anxiety within the setting's community re: prevalence and effectiveness of infection control measures.	Service users	Serious	Our communication with parents and pupils prior to our return in September 2021 will include information about the control measures within this risk assessment. Government guidance for parents is available at: <u>What</u> <u>parents and carers need to know about early years</u> <u>providers, settings and colleges - GOV.UK</u> (www.gov.uk)	Possible	Medium
Community medical requirements	Increased likelihood of serious illness resulting from exposure to coronavirus.	Extremely clinically vulnerable (shielded)	Fatal/ Major	These families will be welcomed to attend their setting unless they have been advised by their GP or clinician not to attend.	Possible	High
9: PROVISION (OF FIRST AID	•				
Provision of first aid	Inadequate first aid treatment exacerbates injury or pre- existing conditions.	Staff & service users	Serious	We will revert to our substantive risk assessment which includes control measures to ensure that suitably qualified staff are available at all times. We will ensure a member of staff with a full PFA certificate is on site at all times when children are present, as set out in the EYFS.	Improbable	Low
10: OFF SITE VI	SITS	I			I	
Off site visits	Exposure to infection from inadequate social distancing etc	Staff & service users	Serious	We will undertake full and thorough risk assessments in relation to all off site visits to ensure they can be undertaken safely. As part of this risk assessment, we will consider what control measures need to be used to reduce the risk of exposure to coronavirus and follow wider advice on visiting indoor and outdoor venues.	Improbable	Low

Setting Reception areas	Exposure to infection from inadequate social distancing: visitors to setting.	Staff & service users	Serious	Signage has been erected to advise visitors of hygiene protocols. Staff signing in arrangements - sanitiser available to clean hands after use. Hand sanitiser will be provided to all persons entering premises with signage to explain control measures etc.	Possible	Medium
	Violence and aggression towards setting staff causes injury and distress	Staff & service users	Serious	We will maintain transparency and regular contact with all members of the setting community. Regular briefings/updates for all staff so that they are aware of setting response to the COVID 19 virus and can communicate consistently to those who ask. Readiness to deploy the range of behaviour remedies if behaviour becomes unacceptable from warning to full banning from site/sect 547 warnings/action.	Improbable	Low

Action plan:

What is the Hazard you need to Control? (Medium to high from the risk rating above)	What additional precautions do you need to either eliminate or reduce the risk to an acceptable level?	Who is responsible for implementing these controls?	When are these controls to be implemented (Date)?	When were these controls implemented (Date)?
vulnerable staff	No staff currently identified as CEV. Regular check ins with staff and supervision.	SLT	Ongoing	

Community medical requirements	Access to services will be discussed on an individual basis with clinically extremely vulnerable service users.	Everyone	Ongoing	
Hand hygiene	Reinforce handwashing routines and remind families regularly. Ensure effective handwashing posters are displayed by every sink.	All staff	Ongoing	
Respiratory hygiene	Ensure catch it, kill it, bin it posters are displayed and provide boxes of tissues in every room.	All staff	Ongoing	
Exposure to the virus	Follow government guidance on self-isolation and ensure social distancing is enforced in the centres.	Everyone	Ongoing	
Cleaning	Maintain stringent cleaning routines and carry out regular checks. Store cleaning products in locked cupboards.	All staff	Ongoing	
Inadequate ventilation	No more can be done			
NHS Track and trace	Follow government guidelines.	Everyone	Ongoing	
Contact with those developing symptoms of the virus during the working day.	Maintain extra vigilance.	Everyone	Ongoing	
Correct use of face coverings	Face masks provided for all staff	Everyone	Ongoing	
Correct procedure for lateral flow testing	Follow NHS instructions.	All staff	Ongoing	From 20/01/21
Management of confirmed cases	Follow government guidelines.	All staff	Ongoing	

Correct disposal of face masks	Waste bins with lids at all settings. Nappy sacks provided for staff going on home visits.	Everyone	Ongoing	
NHS Track and trace	Follow government guidelines.	All staff	Ongoing	
Staff well being	Staff have fortnightly check ins on an individual basis.	SLT	Ongoing	March 2020
Staff training	Continue up dating staff of any changes and offer relevant training.	SLT	ongoing	
Individual staff requirements	No more can be done			
Use of volunteers	No more can be done			
Management of expectations within the Children Centre community	Continue to maintain social distancing. Replace any signs damaged or unreadable.	All staff	Ongoing	
Exposure to infection from inadequate social distancing: visitors to setting.	No more can be done			

Potential Severity of Harm	Meaning of the harm description	Likelihood/Probability of Harm	Meaning of likelihood/probability
Fatal/Major Injury	Death, major injuries or ill health causing long term disability/absence from work.	High (Likely/probable)	Occurs repeatedly/ to be expected.
Serious Injury	Injuries or ill health causing short-term disability/absences from work (over three days absence)	Medium (possible)	Moderate chance/could occur sometimes.
Minor Injury	Injuries or ill health causing no significant long-term effects and no significant absence from work.	Low (unlikely)	Not Likely to occur

Table 2: Risk rating matrix: Potential severity of harm + Likelihood/ probability of Harm = Risk rating

	High (Likely/Probable)	Medium (Possible)	Low (Unlikely)
Fatal/Major Injury	VERY HIGH	HIGH	MEDIUM
Serious Injury	HIGH	MEDIUM	LOW
Minor Injury	MEDIUM	LOW	LOW

Table 3: Action required: Key to ranking and what action to take

	Implement all additional precautions that are not unreasonably costly or troublesome within an agreed timeframe. Reduce risk to a tolerable level.
	Action MUST be taken as soon as possible to reduce the risks and before activity is allowed to continue.
VERY HIGH Risk	STOP ACTIVITY! Take action to reassess the work/activity and apply reduction hierarchy before proceeding.

Monitor and review your rolling programme.