COVID 19 Specific Documentation

Risk Assessment Form

Activity: Nursery setting reopening during COVID19 pandemic	Site:	
Date of assessment: 5 th January 2021 To be read in conjunction with Coronavirus (COVID-19): implementing	Dinotots Childcare Ltd 14 Elliott Street Blyth	
protective measures in education and childcare settings and Actions for education and childcare settings to prepare for wider opening from 1 June 2020	Northumberland NE24 4NR	
People at Risk:	Additional Information: guidance on completion: risk asses	ssment form
Staff, Children, visitors, volunteers, paren <mark>ts,</mark> contr <mark>actors</mark>	Existing service/task specific risk assessments and guidance	e provided by the
	government/Public Health England and internally at NCC. Government/Public Health England Advice: https://www.ga.gov.uk/news/coronavirus.htm NCC Guidance: http://northumberlandeducation.gov.uk NCC PPE Risk Assessment; NCC PPE Risk Assessment; NCC Staff Risk assessment NCC Health and Safety Team webpage Local Authority Scenario Guidance for Covid-19 Infection, Fontrol of Infection Policy	information.aspx ion.co.uk/coronavirus/ DFE
Name of Person Completing Form: Mark Chapman Job Title: Mana	ging Director Date: 05/01/2021	Review Date: 12/04/2021

Hazard	Risk	Initial Rating	Existing Control Measures	Final Rating	Additional Action Required
		L, M, H		L, M, H	(action by whom and completion date – use separate Action Plan if necessary)
Dinotots re-opening following full closure and lack of statutory testing/maintenance	Equipment / system failure leading to enhanced physical or biological risks to people	М	Statutory testing and maintenance, such as water hygiene testing/flushing, fire safety, play/sporting equipment tests, has taken place during the setting's closure. SLT have ensured all necessary checks / paperwork / maintenance is up to date prior to setting opening.	L	Where checks / paperwork /maintenance is lacking; steps taken to address this prior to reopening - items taken out of use (where possible), or guidance obtained from a competent person (manufacturer, service engineer, NCC Property Services).
Use of hand sanitiser	Ingestion of hand sanitiser. Alcohol vapours ignited resulting in burns to hands	M	Always wash hands with soap and hot/warm water wherever possible. Where hand sanitizer is used, it contains a minimum of 60% alcohol. It is kept out of the reach of children and used with staff supervision due to the risk of ingestion. A safety data sheet and COSHH risk assessment are in place for its use. When using alcohol based hand sanitisers make sure all liquid is evaporated before smoking, touching any electrical equipment or metal surfaces which may result in a static shock, or any other source of ignition Skin friendly skin cleaning wipes can be used as an alternative [these should still contain alcohol to be considered as effective as sanitiser]		Bulk supplies of alcohol gel are stored appropriately as flammable substances and the fire risk assessment has been updated accordingly.
Inadequate testing/maintenance and fire safety arrangements during the covid19 pandemic.	Equipment / system failure leading to enhanced physical or biological risks to people	М	Statutory testing and maintenance, such as fire alarm system, emergency lighting, fixed electrical installation, play equipment are maintained as normal. Fire evacuation procedures have been reviewed and a fire drill plan is rescheduled In an emergency situation, a full evacuation will take place as usual.	L	Provision is in place to make adjustments and revisit fire drills. Fire risk assessment has been reviewed and the associated modifications / additional measures implemented to maintain an effective fire strategy (e.g. escape routes, doors held open etc). Any

					changes to the fire risk assessment have been communicated to all staff.
Inadequate ventilation. Unable to achieve a comfortable (or legal minimum) temperature within the building.	Increase in risk of transmission of Covid19. Occupants become cold - poor concentration levels impact on actions/developme nt.	>	General principles when using natural ventilation include opening windows. In cooler weather windows should be opened just enough to provide constant background ventilation, and opened more fully when unoccupied to purge the air in the space. Rooms should, where possible, be fully ventilated for at least 15 minutes prior to and following use where practical Opening internal doors can also assist with creating a throughput of air	L	Providing flexibility to the uniform policy to allow additional, suitable indoor clothing to be worn
Inadequate safety management documentation (policies, risk assessments etc)	Increased risk of contracting Coronavirus through lack of planning.	M	The arrangements in the Covid19 risk assessment are monitored and kept under review. Relevant policies, procedures and other risk assessments have been reviewed and updated where necessary and shared with staff. Arrangements are monitored and kept under review, with staff given the opportunity to comment and feedback on arrangements. New procedures have been documented for: Individuals becoming Covid symptomatic on site or the setting becoming aware of someone symptomatic who has recently attended the setting. Responding to localised lock down and subsequent closure of the setting e.g. arrangements for remote learning pack distribution.		Advice will be provided directly from the NCC public health team. The Northumberland Local Outbreak Prevention Plan is also available on the County Council webpage.
Contact with others who may have Coronavirus Inadvertent transmission to others	Exposure to live virus resulting in contracting Coronavirus. Exacerbation of existing medical conditions.	Н	Staff Staff who are 'clinically vulnerable', pregnant or from a BAME background, are able to return to work and an individual risk assessment is in place for these individuals. This includes those living in a household with someone who is clinically extremely vulnerable.	М	See: COVID-19: quidance on shielding and protecting people defined on medical grounds as extremely vulnerable Pregnant workers model risk assessment (to be completed in

Staff who are 'clinically extremely vulnerable' are furloughed when advised to do so by the Government/NHS during periods when national restrictions are in place.. Outside of this time, their job role and activities have been reviewed and an individual risk assessment is in place for each staff member recording the details of their medical condition and what reasonable adjustments have been made to their job role prior to the staff member returning to the setting

Advice is sought from the Managing Director/Occupational Health provider where necessary and always for staff who have previously been shielding.

Staffing levels are reviewed to ensure adequate levels are in place at all times.

Children

<u>Children in clinically vulnerable and clinically extremely</u> vulnerable health categories (as defined by PHE quidance)

Most children <u>originally</u> identified as 'clinically extremely vulnerable' (CEV) no longer need to follow shielding advice as more evidence has emerged that shows there is a very low risk of children becoming very unwell from COVID-19, even for children with existing health conditions. Those children whose doctors have confirmed they are still CEV are not attending the setting when advised to do so by the Government during periods of national or local restrictions. Appropriate arrangements should be made so that the distribution of learning packs can be delivered to their home.

Outside of these times, for those children in the CEV category, an individual risk assessment has been carried out in consultation with the child's parents and the relevant healthcare professional(s). Advice from health professionals/GP involved in the child's care is essential in these circumstances. Individual Healthcare Plans for all

conjunction with the above assessment for vulnerable staff).

BAME risk assessment

Senior managers are to ask staff to update them immediately if their situation changes.

The potential risks from COVID-19 to children and young people who have an EHCP/additional educational support needs must be assessed in light of individual circumstances including any underlying health conditions. This must be on an individual basis with advice from an appropriate health professional where required. Assessments are in writing and existing assessments may be updated. Staff to be consulted/trained on any resultant measures to be introduced.

Northumberland <u>EHCP planning Tool</u> and Risk Assessment

Where children have an Individual Healthcare Plan, arrangements must be made to ensure that any adults supervising the child understand and are familiar with the plan and have received any training that is indicated to care for the child.

Where there are concerns about the health provision for a child or young person, urgent advice must be sought from a healthcare professional.

children are checked to ensure they are up to date and include advice from the relevant health professional, where appropriate [see also model risk assessment for CV/CEV pupils]

Children who live with someone who is clinically extremely vulnerable, but who are not clinically extremely vulnerable themselves, should still attend the setting

General

General measures which been applied within the setting

- organising children together in small groups
- avoiding contact between groups
- staff maintaining distance from other staff and other groups as much as possible

Staff communicate to children regarding social distancing / personal hygiene etc.

Anyone displaying any symptoms of coronavirus are not permitted on the premises.

Social distancing is applied throughout the setting where possible

visitors to the site, for example, visitor passes and electronic sign-in devices are wiped down with disinfectant.

children clean their hands regularly, including when they arrive at the setting, before and after eating, after sneezing or coughing.

Washing hands thoroughly for 20 seconds with soap and water and/ or use of alcohol hand rub or sanitiser.

Ensuring good respiratory hygiene - promote the 'catch it, bin it, kill it' approach. Disposable tissues are provided

Notices and information displayed in the setting

The location of items (e.g. signage, hand sanitiser stations, lidded bins) is reviewed and cited with regard to site specific circumstances to ensure ease of use.

Staff travelling to and	Contracting	along with lidded bins for used tissues and other waste. This waste is bagged and disposed of. Face coverings are worn when required under national or local rules or where use has been risk assessed as being Arrangements have been put in place for safe disposal/storage of face coverings if worn - disposable masks to be put into a bin bag in a lidded bin, reusable covering to be placed into a bag to take home. Cleaning frequently touched surfaces often using standard cleaning products such as detergents and bleach (if appropriate) Minimising contact and mixing by altering, as much as possible, the environment (such as room layout) The use of dehumidifying units to catch and kill any airborne bacteria / virus particles	M	Review Guidance:
from work.	coronavirus, spread of virus	Only use public transport if you have to; use alternative methods of transport where possible - car, bicycle, walking - maintaining social distancing where possible Those using public transport are identified and encouraged to refer to governments safer travel guidance for passengers When travelling by public transport: Wear a face covering when using public transport if you can (not for use whilst in the setting) - surgical masks not required. avoid rush hours and busy times if you can cover your cough or sneeze with a tissue, then throw the tissue in the bin follow advice on social distancing wash your hands often with soap and water for at least 20 seconds if soap and water are not available, use an alcohol-based hand sanitiser		How to wear and make a cloth face covering Coronavirus (COVID-19): UK transport and travel advice Passenger guidance

Early Years activities	Contracting	H Although EYFS settings can return to normal group sizes L <u>Planning guide for early years and</u>
& cohort bubbles	coronavirus -	Dinotots Childcare has, and will continue to utilize, <u>childcare settings</u>
	staff and	cohorted groups since June 2020 to ensure that staff and
	children, passing	children generally only mix with others in a consistent Protective measures for holiday and
	onto vulnerable	group and keep away from other people/groups as much after-school clubs, and other out-of-
	persons	as possible. Contact with other groups is brief and <u>school settings during the coronavirus</u>
		transitory only. Group sizes are kept as small as possible (COVID-19) outbreak
		General arrangements
		Children taught to adopt good hand and respiratory
		hygiene, to maintain suitable distancing (where
		possible) and to report if they are unwell.
		Staff explicitly supervise health and hand hygiene
		arrangements for all children especially those with
		additional needs. Measures are in place to ensure more
		independent older children are following good hygiene
		practices.
		 Staff informally monitor for presence of symptoms.
		Regular cleaning initiated
		Where possible the same staff work with the same
		groups every week
		Where possible, the same groups remain in the same
		assign <mark>ed 'zones' within the building</mark> . This limits the
		amount of movement around the setting and potential
		contact with other groups.
	1	Where possible areas will be well ventilated, doors
		propped open (where safe to do so, taking into account
		fire safety and safeguarding) to limit use of door
		handles.

Contact with others who may have Coronavirus Inadvertent transmission to others	Exposure to live virus resulting in contracting Coronavirus. Exacerbation of existing medical conditions.	Н	Staff on the clinically 'highly vulnerable' list requiring shielding are self isolating at home for a 12 week period. Those staff on the clinically 'vulnerable list' are working from home/assigned alternative duties (such as supporting remote education, carrying out lesson planning etc). Where this isn't possible a personalised risk assessment for each individual is in place recording the details of the medical condition and what reasonable adjustments have been made prior to the staff member returning to the setting. Advice is sought from Occupational Health where	M	See: COVID-19: quidance on shielding and protecting people defined on medical grounds as extremely vulnerable
		8	necessary. Where staff shortages are identified which impact on the operations of the setting, Children's Services are contacted for additional support (Simon Baxter on 07870 365983).	Ň	



Children

<u>Children in vulnerable and highly vulnerable health</u> <u>categories (as defined by PHE guidance)</u>

Children in "Clinically Extremely Vulnerable" category have been identified and are continuing with remote education. Children classed as "Clinically Vulnerable" can attend Dinotots Childcare following an individual risk assessment carried out in consultation with the child's parents. Advice from health professionals/GP involved in the child's care should also be sought and taken into account. Where a child's health condition changes, Individual Healthcare Plans are updated by the setting ncluding up to date advice from the relevant health professional and must be in line with PHE quidance.

Children (or staff) living in a household with someone who is 'clinically extremely vulnerable' should only attend
Dinotots Childcare if stringent social distancing can be adhered to, and the child is able to understand and follow those instructions. This may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing. Nursery Manager will have made herself familiar with the document
Coronavirus (COVID-19): implementing protective measures in education and childcare settings

Contractors

Contractors will not be allowed access without prior appointment. Contractors are to wear disposable gloves on arrival and social distancing measures are clarified with them on arrival.

The potential health risks from COVID-19 to children and young people who have a EHC Plan must be assessed in light of any underlying health conditions. This must be on an individual basis with advice from an appropriate health professional where required.

Where children have an Individual Healthcare Plan, arrangements must be made to ensure that any adults supervising the child understand and are familiar with the plan and have received any training that is indicated to care for the child.

Where there are concerns about the health provision for a child or young person, urgent advice must be sought from a healthcare professional.

When making appointments, contractors are briefed of the requirements for social distancing and PPE and not to attend Dinotots Childcare if displaying symptoms of COVID19.

			General		Notices and information displayed in the
			Reneral Parents / carers and other visitors are limited. Staff communicate to children regarding social distancing / personal hygiene etc. Government guidance on Coronavirus (COVID-19): implementing protective measures in education and childcare settings is followed. Key issues include: Anyone displaying any symptoms of coronavirus are not permitted on the premises. Social distancing of 2m is applied throughout Dinotots Childcare where possible (specific setting/task risk assessments will be amended as appropriate). Cleaning hands more often than usual and on arrival and before and after eating, sneezing, coughing - washing hands thoroughly for 20 seconds with soap and water and or use of alcohol hand rub or sanitiser. Ensuring good respiratory hygiene - promote the 'catch it, bin it, kill it' approach Cleaning frequently touched surfaces often using standard products, such as detergents and bleach Minimising contact and mixing by altering, as much as	22/	Notices and information displayed in the setting.
Unable to achieve social distancing - All early years activities	Contracting coronavirus - staff and children,	Н	possible, the environment (such as room layout It has been accepted nationally that Early Years & Primary age children cannot be expected to be 2 metres apart at all times. However Dinotots Childcare	7	Children of key workers/vulnerable children in other year groups should also be split into small groups of no
eurry yeurs activities	passing onto vulnerable persons	(has implemented the following to reduce risk: • Children encouraged in a developmental/age appropriate way to adopt good hand and respiratory	1	more than 15. 'Bubbles' should be spaced as far apart as possible.
			hygiene, to maintain suitable distancing and to report if they are unwell. • Staff informally monitor for presence of symptoms.		Access rooms directly from outside where possible.

 Regular cleaning initiated (see below). Dinotots Childcare has cohorted groups so that staff and children only mix in 1 small consistent group and keep away from other people/groups. Contact with other groups is brief and transitory only. Groups sizes and ratios are in line with Government Guidance: EYFS: Maintain EYFS ratios as a minimum and use these to group children. Where above cannot be achieved, consult Government Guidance and discuss options with LEA or MAT. Where possible the same items are used by the same children each day or they are cleaned between use. Where possible the same staff work with the same groups. Schedules have been reviewed to stagger our activities (Outdoor Learning, circle time, lunch, pick up/drop off) to reduce movements and incidence of group mixing, including parents. Equipment use has been revised and measures to reduce simultaneous (as well as cleaning, below) use have been introduced. Where possible areas will be well ventilated, doors propped open (where safe to do so, taking into accoun fire safety and safeguarding) to limit use of door handles. 	'Bubbles'
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Staff use of communal areas/working with different groups.	Contracting coronavirus – staff, children, parents / carers	Н	Staff breaks are staggered to avoid congestion in staff rooms. Consider making additional space available for staff to take breaks and plan how spaces are to be set up, for example, maintain distancing, limit number usage, remove chairs to minimise use of the space, etc. More frequent cleaning of shared spaces should also occur.	L	Review and apply the guidance for working safely in offices if applicable (e.g receptions and shared offices) Offices and contact centres - Working safely during coronavirus (COVID-19) - Guidance
Outdoor education on-site and off-site visits	Contracting coronavirus - staff, children, public	Н	General control measures listed by this risk assessment are implemented as far as they are able to ensure that the risk of virus spread for both staff and children is as low as possible. The NCC Guidance for Outdoor Education - Schools & Establishments during COVID-19 for Planning Safe Activities is followed. Located within the Resources Section on the Evolve system under "Guidance".		On site activities: Submission of an Evolve form is not required, however where risks are significant or are not already covered with another risk assessment the activity must be subject to a written risk assessment. Off site activities: Submission of an Evolve form is required for all Off site visits. Note DfE and FCO advice and OEAP National Guidance.

Play activities	Contracting coronavirus - staff and children	Н	Existing setting play risk assessment has been reviewed against government advice and shared with staff. Lunch times are staggered, so that children are not moving around the setting at the same time. Multiple cohorted groups do not use play equipment simultaneously. It is only used by separate groups and appropriately cleaned between use of groups. For larger pieces of play equipment, where it is not possible to adequately clean this, this has been taken out of use. Soft furnishings, soft toys and toys that are particularly hard to clean have been removed from rooms. Quantities of play equipment have been reduced to support cleaning and management routines.	L	
Provision of meals in the setting	Contracting coronavirus - staff, children	M	The Kitchen has remained fully open and normal legal requirements will apply. Kitchen operations comply with the guidance for food businesses on coronavirus (COVID-19). Catering staff are aware of the content of this risk assessment and the measures required for use of communal staff areas have been implemented e.g for toilets/staff room/changing rooms.	2	Risk assessments have been reviewed and updated where required (both for catering activities and dining hall arrangements, including additional cleaning, placement of tables, bubble group use etc)

Use of communal	Contracting	Н	Free flow play for EYFS has been stopped so that	М	When reviewing areas/spaces
areas - toilets,	coronavirus - staff		movement between indoors and outdoors can be		consider:
Corridors, dining	children,		managed to reduce contact and/or congestion.		
hall, outdoor	visitors,				Widening routes where possible.
spaces, staff	parents/carers		1 7 7 7		
room, offices					



			Halls, dining areas and internal and external sports facilities are used at for no more than half capacity for lunch/sporting activities. These areas can be shared as long as different cohorted groups do not mix and adequate cleaning between group use takes place. Lunch breaks are staggered. Children clean their hands before entering in their cohorted groups (younger children are assisted with this). Groups are kept apart and tables cleaned between each group. If such measures are not possible, children should be brought their lunch in their rooms Arrangements are in place to ensure that toilets do not become crowded by limiting the number of children or young people who use the toilet facilities at one time Staff breaks are staggered to avoid congestion in staff rooms. Measures are applied within management office to	7	Removing unnecessary obstacles. Signing and communications: - markings/signage at entrances - movement intersections encouraging people to wait and allow others to pass One-way movement. Separate entry and exit routes. Enlarge access and exits. Accommodate extended queuing: - Defined queue areas - "Do not join the queue" when capacity reached signs Deliveries. People with additional needs.
Parents/carers picking up/collecting children from Dinotots Childcare	Contracting coronavirus - staff, children, public	H	implement social distancing where possible. Routes, layouts and congregation points have been reviewed and measures introduced to aid circulationso social distancing may be maintained. Queuing system and greeting process determined as appropriate to the setting and facilitates immediate hand wash on arrival. Staff briefed on the arrangements to be applied. Children, young people, parents/carers are advised: Not to enter the building if displaying any symptoms of coronavirus (COVID-19). Only to attend one at a time Of the designated pick up and drop off protocols (time, location, process) to minimise contact. Not to gather at entrances, gates or doors unless have pre-arranged appointments.		

Dinotots Childcare's digital communications channels used to engage and advise parents on protective steps being taken and associated requirements	
2000 770	



Personal care activities Flammable vapours	Contracting coronavirus or passing onto vulnerable or shielded children	Н	Social distancing is implemented where possible. Coronavirus (COVID-19): implementing social distancing in education and childcare settings In addition to standard infection prevention and control measures, staff undertaking personal care within 2m of a child also apply the general principles contained in table 4 of the COVID-19: infection prevention and control (IPC). Staff know how to safely put on and take off PPE. PHE guidance on Putting on PPE; and Taking off PPE is followed by all staff undertaking personal care. This guidance is displayed around nursery and disposal bins are available at these points.	L	PPE requests/shortages in PPE are raise with the Senior Leadership Team.
from alcohol based hand sanitiser	ignited resulting in burns to hands	Ž.	Wash hands with soap and water wherever possible. When using alcohol based hand sanitisers make sure all liquid is evaporated before smoking, touching any electrical equipment or metal surfaces which may result in a static shock, or any other source of ignition.	2	7
Insufficient cleaning/exposure to virus on objects/surfaces	Contracting coronavirus	H	Increased cleaning to take place using standard cleaning products. In particular, objects and surfaces that are touched regularly are frequently cleaned and disinfected. This will include toys, books, chairs, doors, sinks, toilets, light switches, door handles, play equipment etc. Poster on cleaning regimes produced by PHE is displayed for the benefit of staff and children. Staff carrying out cleaning duties are briefed on amended cleaning regimes.		A supply of antibacterial wipes/alcohol gel is made available in Dinotots Childcare setting to encourage staff/children to help maintain cleanliness in personal work areas. Cleaning products used in teaching areas etc are those normally used by staff carrying out cleaning duties - a safety data sheet and COSHH risk assessment are in place for each product.

		A review has been undertaken to remove soft furnishings, soft toys and toys/equipment that are hard to clean (such as those with intricate parts). Rooms are cleaned daily. Where rooms are shared the room		PPE requests/shortages in PPE are raised with the Senior Leadership Team
		and equipment is cleaned between different group use. Bins for tissues are emptied throughout the day. Rooms are well ventilated with windows being kept open where possible. Where doors are propped open to aid ventilation, these are in line with fire safety and safeguarding requirements.		
	1	Where there is a suspected or confirmed case of COVID-19 within the setting, PHE guidance on 'cleaning and waste' in these circumstances is followed (ensure cleaning products used comply with this guidance). Staff wear disposable gloves and aprons as a minimum. Hands are washed with soap and water for 20 seconds when all PPE is removed. NCC PPE Risk Assessment		Bleach should be avoided and an suitable alternative product(s) used. If settings are advised to use a bleach based product, only bleach sprays should be used. It's use must be strictly controlled and it must not be mixed with other cleaning products due to the risk of chlorine gas being liberated. The
		Staff know how to put on and take off PPE correctly: PHE - <u>Putting on PPE</u> ; PHE - <u>Taking off PPE T</u> his guidance is displayed around Dinotots Childcare and disposal bins are available.	14	safety data sheet and COSHH risk assessment must be in place prior to use and shared with staff. See sample COSHH risk assessment
Staff displaying symptoms of coronavirus whilst at Dinotots Childcare	Others contracting H virus.	Dinotots Childcare follow the process detailed in the NCC flowchart "Managing Covid-19 in Northumberland Schools and settings" and complete the report form in relation to the symptomatic person (both for staff and children). Once test result is known the form should be updated with this information. Senior Leadership Team is notified immediately and the staff member is sent home. PHE guidance on self isolation	M	Ensure home and emergency contacts are up to date. A protocol is in place to cover this eventuality and has been shared with all staff who are clear on what action to take if someone becomes symptomatic whilst at the setting.
		is followed - <u>Stay at Home</u> (advised to self-isolate for 7 days - household members should self-isolate for 10 days from when the date the staff member became symptomatic). If they are seriously ill contact 999.		Staff requested to urgently access the national test and trace programme which is now operational and will involve direct discussion with those in close contact with a person who tests positive for Covid19.

			Cleaning the affected area with disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.	
			Where the staff member tests negative, they can return to their setting and the fellow household members can end their self-isolation.	
			Where the staff member tests positive, the rest of their 'Bubble' should be sent home and advised to self-isolate for 10 days from the date the staff member became symptomatic. The other household members of that wider bubble 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. Confirmed cases of Covid-19 should be recorded via ANVIL, as they may be RIDDOR reportable. You should seek further advice via NCC's Corporate Health and Safety team. PHE quidance on action to be taken in these circumstances is adhered, along with the PHE guidance on 'cleaning and waste'. Poster on cleaning regimes produced by PHE is displayed for the benefit of staff.	2
Children displaying symptoms of coronavirus whilst at Dinotots Childcare	Others contractin <mark>g</mark> virus.	H	Dinotots Childcare follow the process detailed in the NCC flowchart "Managing Covid-19 in Northumberland Schools and settings" and complete the report form in relation to the symptomatic person (both for staff and children). Once test result is known the form should be updated with this information. Senior Leadership Team and parent/ carer is notified immediately and the child is sent home and PHE guidance on self isolation is followed - Stay at Home (advised to self-isolate for 7 days - household members should self-isolate for 10 days from when the child became symptomatic). If they are seriously ill contact 999. If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a	Ensure emergency contacts are up to date. A protocol is in place to cover this eventuality and has been shared with all staff who are clear on what action to take if someone becomes symptomatic whilst at the setting. Parent/carer is requested to urgently arrange a test for their child via the national test and trace programme which is now operational and will involve direct discussion with those in close contact with a person who tests positive for Covid19.

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

PPE is only required by staff caring for the child while they await collection in the following circumstances: (see also <u>Symptomatic children action list for schools</u> and <u>Safe</u> working in education, childcare and children's social care settings, including the use of personal protective equipment (<u>PPE</u>))

- a fluid resistant (type IIR) face mask should be worn if a distance of 2 metres cannot be maintained
- if contact is necessary, then disposable gloves, apron and a face mask should be worn
- eye protection (e.g. visor or goggles) if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting.

See which includes specifications for PPE to be used; this should be recorded in this risk assessment and your protocol)).

Any members of staff who have helped someone with symptoms and any children who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) or they have been requested to do so by NHS Test & Trace.

They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell.

			Cleaning the affected area with disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people. Where the child tests negative, they can return to their setting and the fellow household members can end their self-isolation. Where the child tests positive based on advice from the NCC Public Health Team, the rest of their bubble, should be sent home and advised to self-isolate for 10 days from the date the child became symptomatic. The other household members of that wider bubble 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. If a close contact in a bubble or group that has been asked to self-isolate develops symptoms themselves within their 10-day isolation period they should follow guidance for households with possible or confirmed coronavirus (COVID-19) infection. PHE quidance(Section 1 - Part 9) on action to be taken in these circumstances is adhered, along with the PHE guidance on 'cleaning and waste'. Poster on cleaning regimes produced by PHE is displayed for the benefit of staff		
Outbreak of Covid- 19 in local area or Dinotots Childcare resulting in partial of full closure of the setting/resumption of lock down			The <u>Northumberland Local Outbreak Prevention Plan</u> will be instigated by the Director or Public Health. The Senior Leadership Team will fully cooperate with the process and follow advice from the NCC public health team/health protection team	1	Dinotots Childcare has a plan in place to deal with partial or full closure of the Setting
Inadequate first aid provision	Serious injury or death First aider contracting	Н	A review of the first aid needs assessment has taken place to decide if sufficient appropriate cover can be provided for the activities which are being undertaken.	L	All Staff have completed an online refresher course for Pediatric 1 st aid at the end of 2020. All staff have a

	coronavirus or spreading virus to others.	This will include a review of any higher risk activities which may be planned. Such activities may need to be suspended if an appropriate level of cover cannot be maintained. There should be an appointed person as a minimum to check 1st aid kits and summon the emergency services. First aiders providing routine first aid treatments within 2m of a person should wear a fluid resistant face mask and, if appropriate and available, disposable plastic apron and disposable eye protection which should be kept in or next to first aid kits. CPR In respect of more serious cases where CPR may be required, the specific advice contained in the Resuscitation Council UK guidance should be followed particularly in relation to rescue breaths. As chest compressions could produce aerosol spray, appropriate PPE should be worn i.e. fluid resistant surgical mask, gloves and eye protection (goggles or visor). If PPE is not available, use a towel or cloth such as the sling from the first aid kit to cover the person's nose and mouth while performing chest compressions A first aider should conduct a dynamic risk assessment of the situation they are faced with and apply appropriate precautions for infection control. Further information is also contained in the Government publication: Guidance for first responders and others in close contact with symptomatic people with potential COVID-19	Pediatric 1st aid qualification and any that have recently expired may qualify for a 3- month extension. Staff must be able to explain why they haven't been able to requalify and demonstrate what steps they have taken to access the training, if asked to do so. See HSE guidance https://www.hse.gov.uk/news/first-aid-certificate-coronavirus.htm As a nursery we will apply the Government guidance in relation to paediatric first aid cover: https://www.gov.uk/government/publications/early-years-foundation-stage-framework2/early-years-foundation-stage-coronavirus-disapplications
Lack of communication with staff/parents/others	Confusion/mis- H information resulting in breakdown of arrangements.	Staff have been involved in the planning process for return for a wider Setting re-opening, including risk assessments, procedure if someone becomes symptomatic in the setting, policy reviews etc. These arrangements are to be kept under	Parents have access to the <u>Covid19</u> <u>Quick Guide checker</u> - this is available on Dinotot's webpage and has been brought to the attention of parents.

			constant review, with staff invited to provide feedback. Regular information sharing and communication with staff. Use of IT software for virtual meetings, e.g. Zoom Meetings Parents are kept informed of changes in timings to the settings day and the arrangements put in place by the setting to comply with the government guidance to keep children safe. The arrangements in place for children are shared with them in an age appropriate way.		
Uncertainty due to the unprecedented nature of the pandemic Maintaining staff wellbeing and mental health	Stress and anxiety arising through uncertainty, lack of control and reduced contact	M	Regular information sharing and communication. Use of IT software for virtual meetings, e.g. Zoom Meetings. Shared distribution of workload, e.g. rota for staff Regular communications are in place between staff and Senior Leadership Team. Staff also have access to all shared information/documentation. Governing Body are involved with decision making in relation to measures in place where appropriate.	2,	Stress risk assessment reviewed. Information distributed on local and national help and support organisations inc contact numbers
Children's uncertainty surrounding attendance/return to setting / isolation	Stress and anxiety impacting themselves and staff	M	Good communication of Covid19 controls measures/arrangements to parents and children provides reassurance on attendance or return to the setting. Parents have the opportunity to discuss concerns with staff. Provision of extra-curricular activities available to all children designed to: support the rebuilding of friendships and social engagement address and equip children to respond to issues linked to coronavirus (COVID-19) support children with approaches to improving their physical and mental wellbeing		The setting will provide training and resources for staff to respond to the wellbeing and mental health needs of children and young people as a result of coronavirus (COVID-19). The training will be sought through NoodleNow

Where vulnerable children (such as those who have a social worker or an education health and care (EHC) plan) are self-isolating, arrangements are in place to keep in contact with them, offer support, and check they are able to access education support. For children who are in the care of the LA or Looked after ESLAC will be informed.

