

Risk assessment for COVID safe protocols in Autism Early Support Trust Ltd. – Nursery and outreach

| Risk Assessment title | Assessor(s) | Date last updated | Review cycle |
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| Covid-19 | Laura Gomersall | August 2021 | As national guidance updated and/or half termly |

| Focus/Area | Hazards identified/ Person(s) at risk | Control measures in place | References | Action required |
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| Awareness of and communication about safety and control measures | People accessing AES buildings are unaware of protocols in place and do not follow these, leading to increased risks of transmission of virus to staff and children. | <ul style="list-style-type: none"> • AES keeps up-to-date with advice issued by, but not limited to, the following (and updates this risk assessment and related protocols in response to this): <ul style="list-style-type: none"> - DfE - NHS - Department for Health and Social Care - PHE - The nursery's local health protection team (HPT) - Buckinghamshire County Council • All staff, parents, volunteers and visitors are aware of all relevant AES procedures. Risk assessment document to be shared with all staff and parents/carers on a half termly basis and whenever updated. • Staff are informed of the symptoms of possible Covid-19 infection e.g. a cough, difficulty in breathing, high temperature, loss of, or change in, their normal sense of taste of smell and are kept up-to-date with national guidance about the signs, symptoms and transmission of coronavirus. • All staff remind parents and any visitors of protocols regularly and where necessary. | <p>https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings</p> <p>https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care</p> | |

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| | | <ul style="list-style-type: none"> • All staff instructed to monitor themselves and others and look out for similar symptoms if a child or staff member has been sent home with suspected coronavirus. • Staff asked to be vigilant and report any concerns about their own, a colleague's or child's symptoms. | https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures | |
| Visitors | Increased risk of virus transmission between staff and children from visitors accessing nursery and Buckingham offices. | <ul style="list-style-type: none"> • Visitor will access the nursery building by appointment only • All visitors will be asked to carry out a Lateral Flow Test the morning of their visit. • All visitors will be shown areas of hand washing and where this is hand sanitiser. • Any essential visitors who are required to observe a child (for example social workers) should do this in outdoor play area. • Visitors to read and sign a declaration regarding Covid-19 on arrival. | https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures | |
| Arrivals and departures | Risk of transmission of virus to all persons accessing AES. | Staff: <ul style="list-style-type: none"> • Staff to wash hands immediately on arrival at AES. | https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/ | |

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| | | <ul style="list-style-type: none"> • As of Aug 16th, if you are fully vaccinated, you are not legally required to self isolate if you have been in contact with someone who has tested positive. Additional caution required around vulnerable groups. Take a PCR test as a precaution and seek advice from line manager. • Staff not to attend work and to get tested immediately if they showing symptoms of Covid-19. • If a member of a staff member’s household has tested positive they will not attend work and carry out a PCR test. • If results of the PCR are negative they can return to work but will carry out daily lateral flow testing until the end of the isolation period for the member in their household. • Staff asked to declare themselves symptom free when signing in at work each day. • Staff to use staff entrance and exit. <p>Children:</p> <ul style="list-style-type: none"> • Parents/carers informed not to bring their children or attend outreach sessions if they or any household members are showing symptoms of Covid-19. • If a child is presenting with symptoms of COVID-19 they will be asked to get child tested at a testing site. They may resume with nursery or outreach sessions if results are negative. They will isolate at home for 10 days from start of symptoms if results are positive. • Parents/carers asked to check child’s temperature prior to each nursery session and to confirm they are showing no symptoms of Covid-19 each time they bring their child into nursery. • On arrival at nursery, children to be brought up to the garden or soft tarmac area gate (depending on their grouping). This will happen one at a time as directed by staff. • Parents/carers to wait with their children in the car park area until directed. Parents to leave their child at the gate. | <p>https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings</p> <p>https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care</p> <p>https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures</p> | |
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| <p>Physical distancing</p> | <p>Risk of transmission of virus increases when physical distancing measures cannot be followed, particularly in smaller spaces indoors.</p> | <ul style="list-style-type: none"> • This is no longer a legal requirement but staff will be mindful of risk and maintain this when possible (e.g. staff meetings). | <p>https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings</p> <p>https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care</p> <p>https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures</p> | |
| <p>Physical environment (layout of rooms and learning areas and ventilation)</p> | <p>Lack of/inadequate ventilation may increase the risks of virus transmission.</p> | <ul style="list-style-type: none"> • Ventilate all rooms using natural ventilation where possible. Doors and windows to be kept open wherever possible ensuring this does not impact on children’s safety. • Children’s pegs to be spaced out. • During home and school visits, staff to observe and determine if increased ventilation in possible (e.g. keep a door open, request for a window to be opened). | <p>https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm</p> | |

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| Vulnerable groups | Increased risk of medical complications for vulnerable groups who contract Covid-19. | <ul style="list-style-type: none"> • Vulnerable groups no longer asked to shield. • Parents/carers or staff to notify the nursery if they or their child has a compromised immune system or a medical condition that means they are vulnerable to infections. • Individual risk assessments to be put in place for any members of staff or children who require them. This should be done in liaison with individuals' medical professionals where necessary and relevant. | https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19 | |
| Illness | Increased risk of virus transmission to any persons in attendance at AES buildings and during visits when around others who are unwell. | <p>Children:</p> <ul style="list-style-type: none"> • Any child who appears or reports feeling unwell to have temperature taken using non-contact thermometer. • Any child who displays symptoms of Covid-19 to be taken home immediately, or as soon as practicable, by their parents. Parents to be informed and asked to collect their child as soon as possible. • Parents/carers are advised to contact NHS 111 for medical advice, to arrange to get their child tested and to follow government guidance relating to isolating at home for their child and household. • Any unwell child who is waiting to go home to remain in the room/space they are using supported/supervised by one member of staff. If indoors, room door to remain closed and window open for ventilation. Staff member to wear full PPE (mask, face shield, apron and gloves). PPE available in every room. Other children in group to be moved to the next area/room on their schedule or the outdoor play area. <p>Staff:</p> <ul style="list-style-type: none"> • Any member of staff who displays signs of infection to be sent home immediately and advised to contact NHS 111 if they are concerned about their symptoms. Staff member to be advised to | <p>PHE South East Health Protection Team: Guidance for Childcare and Educational Settings in the Management of COVID-19 Version 2.0 Date 5/08/2020</p> <p>Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'</p> <p>https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/</p> | |

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| | | <p>follow government guidance relating to isolating at home and testing for themselves and their household.</p> <ul style="list-style-type: none"> • If a member of staff has helped someone with symptoms, they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. • Areas used by staff or children who are unwell and need to go home to be appropriately cleaned once vacated as per guidance. See cleaning section and government guidance for details. • All staff and children attending a childcare setting will have access to a test if they display symptoms of Covid-19. Where the child or staff member tests negative, they can return to their setting when well. | <p>https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/</p> <p>COVID-19: cleaning of non-healthcare settings guidance.</p> | |
| Confirmed case of Covid-19 | Risk of virus transmission to anyone at AES who has been in contact with someone who has tested positive for Covid-19 | <ul style="list-style-type: none"> • If a staff member or child tests positive, they should follow government guidance and must isolate at home for 10 days from the onset of their symptoms and then return to nursery only if they do not have symptoms other than cough or loss of sense of smell/taste. A cough or anosmia can last for several weeks once the infection has gone. The 10 day period starts from the day when they first became ill. If they still have a high temperature, they should continue to isolate at home until their temperature returns to normal. • As soon as the nursery becomes aware of 2 confirmed cases of Covid-19, the PHE South East Health Protection Team will be contacted. This team will also contact schools directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the nursery – as identified by NHS Test and Trace. The Health Protection Team will carry out a rapid risk assessment to confirm who has been in close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate. • AES management to inform the relevant nursery of any child attending a dual setting who has tested positive for Covid-19 or | <p>PHE South East Health Protection Team: Guidance for Childcare and Educational Settings in the Management of COVID-19 Version 2.0 Date 5/08/2020</p> <p>Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'</p> <p>Actions for early years and childcare providers during the COVID-19</p> | |

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| | | <p>who has been in close contact with a staff member of child who has tested positive.</p> <ul style="list-style-type: none"> • Outreach practitioners to inform settings and homes if a member of staff has tested positive and that has been in contact with children and adults from that setting. • The Health Protection Team will provide definitive advice on who must be sent home. <p>If there are any complex cases and/or if there are two or more confirmed cases at the nursery within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected we will work with the PHE South East Health Protection Team who will be able to advise if additional action is required.</p> | <p>pandemic - GOV.UK (www.gov.uk)</p> <p>https://www.gov.uk/guidance/contacts-phe-health-protection-teams</p> | |
| <p>Inadequate staffing levels/qualified staff ratios due to staff absence linked to Covid</p> | <p>Children cannot be effectively supervised/cared for; Ofsted regulations not met; session cannot run</p> | <ul style="list-style-type: none"> • Team of zero hour contract bank staff who are available to provide cover at short notice and part-time staff who can be available to work extra shifts as needed. • If there are not sufficient staff members available to run the session safely/with the ratio of qualified staff required then families will be told that the session is cancelled and places will be prioritised for the most vulnerable children and for children of key workers based on government guidance and nursery management knowledge of family situations. Staff to refer to table showing which children have an EHCP, which have an allocated Social Worker and those considered vulnerable for other reasons as well as those whose parents are key workers. • The families of any children not attending will receive remote support via email, telephone and virtual meetings. Liaison with other services and multi-disciplinary professionals (such as Social Workers and Psychologists) will continue and the team around the family will be contacted so they are aware the child is not attending nursery. | | |

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| <p>Hygiene</p> | <p>Poor hygiene practice increases risk of transmission of virus to all persons attending AES.</p> | <ul style="list-style-type: none"> • Hands to be washed/antibacterial gel to be used by all staff and children on arrival and before departure and when leaving each room/area. • Antibacterial gel dispensers to be available in each room and each member of staff to have their own dispenser bottle and tissues on their person. • Any spilled bodily fluids, e.g. respiratory and nasal discharges, to be cleaned up immediately by staff. PPE (gloves) to be worn when cleaning up bodily fluids. • The 'catch it, bin it, kill it' to be promoted to all staff. • Staff to model, promote and help children with respiratory hygiene (covering mouth or nose when they cough and sneeze). PPE (gloves) to be worn wherever possible when helping children with respiratory hygiene. | <p>https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/</p> <p>COVID-19: cleaning of non-healthcare settings guidance.</p> | |
| <p>Cleaning</p> | <p>Inadequate cleaning protocols increases risk of transmission of virus to all persons attending AES.</p> | <ul style="list-style-type: none"> • AES management team to monitor the cleaning standards throughout the day and at the end of each day and discuss any additional measures required with cleaning staff in regards to managing the spread of coronavirus. <p>Routine cleaning:</p> <ul style="list-style-type: none"> • Cleaning protocols in place for and displayed at each room/area - to be followed by all staff members during and at the end of each session. • Cleaning resources to be available in each room (out of reach/locked away from children). • All resources, surfaces and high use points to be cleaned at the end of each session (see separate cleaning protocols displayed in each room). • Chairs, tables and resources in use within each room to be limited to those necessary for the activity to reduce need for cleaning. • Toys/resources that are used within the session to be either: <ul style="list-style-type: none"> - Cleaned via the dishwasher/washing machine - Wiped down with hot soapy water. - Left outside for 6 days before use again. | <p>https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care</p> <p>COVID-19: cleaning of non-healthcare settings guidance</p> <p>PHE South East Health Protection Team: Guidance for Childcare and Educational Settings in the Management of COVID-19 Version 2.0 Date 5/08/2020</p> | |

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| | | <ul style="list-style-type: none"> - Put in the correct quarantine box. • Children to have their own individual box of resources including any preferred fidgets, chewy tubes. Staff members to ensure these are returned to the box throughout the session when no longer in use and cleaned at the end of each session. <p>Cleaning following suspected/confirmed case of Covid-19:</p> <ul style="list-style-type: none"> • The minimum PPE for cleaning an area after suspected or confirmed case of COVID-19 has left the setting is disposable gloves and an apron. • All frequently touched surfaces (door handles, taps, table tops, keyboards etc.) should also be cleaned and disinfected. Disposable cloths/paper roll, disposable mop heads to be used to clean hard surfaces. • A combined detergent and disinfectant or a two-stage cleaning process of detergent (household type cleaner) followed by a hypochlorite solution (1000ppm) e.g. diluted Milton (check chemicals in use are effective against enveloped viruses) to be used. • Any COVID-19 related waste to be double-bagged and stored for 72 hours before usual disposal. | | |
| Administering first aid | <p>Increased risk of virus transmission between children and staff members when close proximity is required such as for administering first aid.</p> <p>Risk of transmission of virus between first aider and person requiring rescue breaths when</p> | <ul style="list-style-type: none"> • AES first aid policy to be followed. • Gloves, aprons and masks should be worn when administering first aid or dealing with a medical emergency and physical distancing cannot be observed. • First aiders made aware that where a child requires rescue breaths, it is acknowledged that doing this increases the risk of transmitting the COVID-19 virus, either to the rescuer or the child. This risk is small compared to the risk of taking no action as this may result in certain cardiac arrest and the death of the child. • First aiders made aware of the new guidance from the UK Resuscitation Council around the changes to CPR practices to be used with adults and advised to watch the link below video: https://www.resus.org.uk/media/statements/resuscitation- | https://www.resus.org.uk/covid-19-resources/covid-19-resources-general-public/resuscitation-council-uk-statement-covid-19 | |

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| | resuscitation is necessary. | council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/ | | |
| Snack and Mealtimes | Risk of virus transmission between children when snack and mealtime resources are shared. | <ul style="list-style-type: none"> • Children to bring in their own snacks, lunch and drinking vessels. • Child's own labelled snack basket to be used to contain all snack items. • Child's own labelled place mat to be used. • Table, chairs, snack baskets and place mats to be wiped down after child's snack or lunch. | | |
| Soft play | Increased risk of virus transmission between children and staff members in small, shared indoor spaces | <ul style="list-style-type: none"> • Balls to be removed from ball pool. • Soft play equipment available within each session to be limited. • Cleaning protocol for room on display and to be followed by all staff during and at the end of each session. | | |
| Supporting toileting/nappy changes | Increased risk of virus transmission between children and staff members when close proximity is required such as for nappy changes/support with toileting. | <ul style="list-style-type: none"> • PPE to be available in bathroom. • Staff to wear aprons and gloves when supporting with nappy changes/toileting. • Staff to position themselves so they are not directly in front of the child wherever possible (for example, have child stand for nappy changes where able). • Staff member to follow bathroom cleaning protocol once child has returned to their activity. | | |
| Office/admin resources | Risk of virus transmission between/to staff members through shared resources. | <ul style="list-style-type: none"> • Appropriate cleaning wipes to be available in all offices. • Staff to use own work laptops wherever possible. • Ipads to be cleaned immediately after use. • Office PC keyboard and mouse to be cleaned after use. • One designated staff member to answer the telephone during the session. If the call is for someone else, then name and number of person needs to be taken and the call will be returned. Phone to be cleaned after use. | | |
| Home/school visits | Risk of virus transmission between/to children, families, carers and staff. | <ul style="list-style-type: none"> • Families to be made aware of COVID-19 procedures prior to home visit via email. • Individual risk assessment to be carried out on case by case basis as needed. • Staff to wash hands on arrival and departure. | Actions for early years and childcare providers during the COVID-19 pandemic - GOV.UK (www.gov.uk) | |

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| | | <ul style="list-style-type: none"> • Staff to use hand sanitiser at frequent intervals, particularly following a period of handling toys and equipment. • Staff to be aware of setting procedures and adhere to these. • Staff to inform setting if they have COVID-19 in line with track and trace guidelines. | Contingency framework: education and childcare settings (publishing.service.gov.uk) Coronavirus: how to stay safe and help prevent the spread - GOV.UK (www.gov.uk) | |
| Contingency plan | Should 2 or more people test positive for COVID – 19 the contingency plan will be effective. | <ul style="list-style-type: none"> • This will reported to public health England for advice and reported to Ofsted. • Currently we have a bank of staff that can support us if we have a staff member who needs to self-isolate. • If a point is reached where staffing is an issue and we cannot meet our ratios, then the most vulnerable children will be prioritised this will be monitored so that we can ensure children do have access to our facilities. • We will then support families via telephone calls and virtual support. <p>AES (nursery and outreach):</p> <ul style="list-style-type: none"> • Visits to be carried out online where possible. • Staff to maintain a physical distance of 1 metre plus from other staff members wherever possible as long as this does not impact on a child’s safety or their ability to carry out their role. • No more than three members of staff working in management team office at a time. • No more than one member of staff working in admin office at a time. • When working in nursery offices and it is not possible to maintain a physical distance of 1 metre from other staff members, room screens to be used and masks worn. | Actions for early years and childcare providers during the COVID-19 pandemic - GOV.UK (www.gov.uk) Contingency framework: education and childcare settings (publishing.service.gov.uk) | |

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| | | <ul style="list-style-type: none"> • No more than two members of staff to be working in therapist's office (with screen and maximum space between them: Deputy's desk and SLT desk). • No more than two members of staff in parent's area. Staff should sit on either side of the screen. Lunch breaks to be staggered to support distancing. • Masks to be worn in offices and other areas where physical distancing cannot take place. <p>Nursery:</p> <ul style="list-style-type: none"> • Children to go to groups of up to four children and no more than 4 adults for the duration of their session and remain in their base rooms for teaching sessions. Mixing with other group to be avoided wherever possible and only outside. • The same staff members to be assigned to each group and, as far as possible, these stay the same during the session/day and subsequent days where possible and where staffing allows. • Adults to avoid physical contact with the child(ren) they are supporting where reasonably possible. It is accepted that some children will need physical assistance to maintain their safety, complete a task and/or provide emotional regulation support. • Adults to maintain a different height from the child(ren) and avoid being directly in front of them where reasonably possible during interactions. • No more than three children and two adults in the soft play room at one time. • No more than four children and four adults in teaching room 1 and snack area at one time. • No more than four children and three adults in teaching room 2 at one time. • No more than four children and four adults in soft tarmac area at one time. • No more than six children and five adults in garden area at one time. | | |
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| | | <ul style="list-style-type: none">• No more than two children or one child and one adult on trampoline at one time.• When supporting a child off the trampoline, staff to encourage them to climb down by holding onto and facing the trampoline.• Single file only in corridor. Groups to transition around the building using one way system as per schedule. Wherever reasonably possible, toilet visits to be incorporated into children's schedules when using rooms adjacent to bathroom. When this is not possible, corridor to be avoided unless empty.• Children to access pegs at different times. Children to bring only coats, snack/lunchboxes, drink vessels, nappies, spare clothing and prescribed medication into nursery. No unnecessary items.• When the nursery is in operation, masks to be worn indoors where distancing is difficult and this does not impact on staff members' ability to interact with and support individual children. | | |
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