

**Staffordshire County Council
Oaklands Nursery Covid 19 Risk Assessment**

Delivering Education during the COVID-19 Pandemic from 11.1.21.

<p>What are the hazards?</p>	<p>Who might be harmed and how?</p>	<p>What are you already doing? List the control measures already in place</p>	<p>What is the risk rating – H, M, L? See section 5</p>	<p>What further action, if any, is necessary, if so what action is to be taken by whom and by when?</p>	<p>Action Completed State the date completed and sign.</p>	<p>What is the risk rating now – H, M, L? See Section 5</p>

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<p>Exposure to COVID-19</p> <p>The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing. The virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).</p>	<p>Everyone on site.</p> <p>General transmission may occur: Through close contact between colleagues, pupils and visitors and touching contaminated surfaces.</p>	<ul style="list-style-type: none"> • Anyone feeling unwell is informed not to attend school. – Information in Safe Working Practices document circulated to all staff, communicated to parents. • Testing available for staff and household. • Local Outbreak Control Plans. • Social distancing maintained wherever possible between all adults on site and between pupil groups (2yr old room and 3 yr old room remain separate). • Frequent handwashing promoted. • Hand sanitiser available in classrooms, shared spaces. • Frequent cleaning of surfaces that pupils touch. • Staff, parents and visitors informed of the measures in place to reduce transmission – letters to parents. Safer working practices document • Visitors on site limited and access to building controlled. • Only 1person in the admin offices and small kitchen at a time. • Storerooms and cupboards accessed by one person at a time. • Only 2-3 staff in staffroom or big kitchen at a time and keep social distance. • No unnecessary sharing of equipment e.g use own pen to sign in, staff use own drink/water bottle • Allocated kitchens and staff toilets to named staff to reduce cross contamination • Children’s toilets and sinks allocated to named groups to reduce cross contamination 	<p>Moderate</p>	<ul style="list-style-type: none"> • Individual risk assessments carried out for staff at higher risk. • Review team stress risk assessment. • Review COSHH assessment for hand sanitiser and cleaning materials – COSHH document in each cleaning station. • Review cleaning schedules – Service Master. • Signage used to promote hygiene (respiratory and hand) and social distancing. • Review and maintain stocks of soap, hand sanitiser, tissues. • Contractors delivering services using school facilities- routine maintenance checks and cleaning asked to provide copies of their risk assessment for managing exposure to COVID-19.. • Outside contractors carrying out checks will be asked to attend before 9am or after 3.30 pm. The reset and recovery policy is sent prior to the visit. • Jan 22 All staff will continue to test twice weekly In the event of being identified as a close contact all staff will take a LFT daily for seven days. • If a symptomatic and a positive LFT is received there is no requirement to take a PCR test. However if symptoms are present individuals will be required to take a PCR test. • If testing positive for COVID 19 isolation can end on day 8 if two negative LFT's have been received on day 6 and 7. Testing must take place 24hrs apart and no symptoms displayed. 	<p>Reviewed Jan 22 ✓</p> <p>Reviewed Nov 21 request to service master for use of anti -back plus rather than Chlorisan for use in the classroom spray bottles and for surfaces</p> <p>Reviewed Jan 22 ✓</p> <p>Reviewed Nov 21 ✓</p> <p>Reviewed Jan 22 ✓</p> <p>Check LFT stocks ✓</p>	<p>Moderate</p>

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<p>Resuscitation Council UK Statement: It is likely that a child having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.</p>						

temperature).	<p>Sick children Staff Transmission may occur when supervising pupils taken ill with symptoms of COVID-19 and need direct personal care until they return home.</p>	<ul style="list-style-type: none"> Member of staff takes child outside to wait for parents to collect them. Parent is asked to collect child PPE provided for supervising adult: Fluid resistant surgical mask, disposable gloves and disposable apron. PPE double bagged and retained for 72 hours before disposal. 	High	<ul style="list-style-type: none"> Maintain stocks of PPE. Where this is not available contact Local Resilience Forum/LA. Supervising adult instructed on the safe “donning and doffing” of PPE. Consider using first aiders to supervise to reduce numbers of staff who need access to PPE. 	<p>✓</p> <p>✓</p>	
	<p>Medication Staff and pupil. Transmission may occur when staff administer medicines</p>	<ul style="list-style-type: none"> Staff administering medicine wears gloves, and mask if the child is likely to spit medicine out or resist. Usual medication form to be completed 	Moderate	<ul style="list-style-type: none"> Review medication plans to assess PPE requirements (if any) for staff administering medication. 		Moderate

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4. Tick (✓) if any of the identified hazards relate to any of the following specific themes:

Hazardous Substance	Manual Handling	Display Screen Equip	Fire	Work Equip / Machinery	Stress	Individual Person such as Young Person New/ Expectant Mother or Service User
					✓	✓

If any are ticked a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

5. Risk Rating

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

<i>The level of risk is calculated by:</i>	<i>The likelihood</i>	<i>X</i>	<i>The Consequence</i>			
	1- Very unlikely		1- Insignificant (no injury)	1 – 4	Low (acceptable)	No further action required
	2- Unlikely		2- Minor (minor injury needing first aid)	5 – 9	Medium (adequate)	If risk cannot be lowered any further, consider risk against benefit. Monitor and look to improve at next review
	3- Fairly likely		3- Moderate (up to 3 days absence)	10 – 16	High (tolerable)	Identify further control measures to reduce risk rating. Seek further advice e.g. line manager, H&S team, etc.
	4- Likely		4- Major (more than 3 days absence)	17 - 25	Very High (unacceptable)	Do not undertake the activity. Implement immediate improvements
	5- Very likely		5- Catastrophic (death)			

6. Assessment

Signature of Assessor(s):
Print Name: Nadine Key

Signature of Line Manager:
Print Name: Nadine Key

Date Assessed: 11.1.22

Review Date: March 22 or as advised

7. Communication and Review

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed annually or following a significant change, accident or violent incident.