

School reopening risk assessment: Southampton City Council.

Name of school: Hardmoor Early Years Centre

Name of person filling out this assessment: Emma Bator & Susanne Ottens

Date of completion: 03/02/2021 (8th full review)

Review date: This risk assessment is a live document and updated as new guidance is issued

Date of review by governing body: January 2021

Legend

EHT: Executive Head Teacher

HoC: Head of Centre

When assessing risk, leaders and governors must use professional judgement and seek further advice as appropriate. We recommend that settings use the following formulae to identify risks and to formulate appropriate countermeasures.

### Impact x Likelihood = Risk

Impact	Score	Health and safety effect
Critical/ Catastrophic	5	Multiple deaths of employees, service users, members of the public, etc.
Major	4	Death of an employee, service user, member of the public, etc.
Moderate	3	Serious injury (acute, chronic or life-changing) to employee, service user or member of the public requiring medical intervention.
Minor	2	Minor injury such as a bump or bruise that may require First Aid treatment and the person returns to work.
Insignificant/ Negligible	1	A day to day issue/problem but negligible harm would result.

Likelihood	Score	Expected frequency
Almost Certain	5	Reasonable to expect that the event WILL undoubtedly happen/recur, possibly frequently and is probable in the current year
Probable / Likely	4	Event is MORE THAN LIKELY to occur, will probably happen/recur, but is not a persisting issue. Will possibly happen in the current year and be likely in the longer term
Possible	3	LITTLE LIKELIHOOD of event occurring. Not likely in the current year, but reasonably likely in the medium/long term.
Unlikely	2	Event NOT EXPECTED. Do not expect it to happen/recur. Extremely unlikely to happen in the current year, but possible in the longer term.
Very Unlikely /Rare	1	EXCEPTIONAL event. This will probably never happen/recur. A barely feasible event.

Overall risk rating: Impact x Likelihood = Risk						
Likelihood	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	13	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
		<b>Impact</b>				

Level of Risk	Overall Rating	How the risk should be managed
HIGH RISK	15-25	Immediate Management Action
MEDIUM RISK	9-12	Plan for Change
LOW RISK	1-8	Continue to Manage

When completing this document please be mindful of the following guidance from the department for education:

<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools#section-1-public-health-advice-to-minimise-coronavirus-covid-19-risks>

<https://www.hse.gov.uk/coronavirus/working-safely/index.htm>

The following principles will apply to this phase of full opening by settings:

### **System of controls**

This is the set of actions schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the sections below.

#### **Prevention:**

- 1) minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school
- 2) Where recommended, the use of face covering in school
- 3) clean hands thoroughly more often than usual
- 4) ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach
- 5) introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach
- 6) minimise contact between individuals and maintain social distancing wherever possible
- 7) where necessary, wear appropriate personal protective equipment (PPE)

8) always keeping occupied spaces well ventilated

Numbers 1 to 5, and number 8 must be in place in all schools, all the time.

Number 6 must be properly considered and schools must put in place measures that suit their particular circumstances.

Number 7 applies in specific circumstances.

**Response to any infection:**

9) engage with the NHS Test and Trace process

10) manage confirmed cases of coronavirus (COVID-19) amongst the school community

11) contain any outbreak by following local health protection team advice

Numbers 9 to 11 must be followed in every case where they are relevant.

What are the hazards?	Who might be harmed and how?	Overarching control measures	Specific control measures to allow for safe school reopening?	Who is responsible for enacting these measures?	When will they be completed by?	Impact score with controls	Likelihood score with controls	Risk score
Pupils enter the school with COVID-19 symptoms	Pupils, staff and visitors. Risk of CV19 infection.	1) minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or	Ensuring that pupils, staff and other adults do not come into the school if they have <a href="#">coronavirus (COVID-19) symptoms</a> , or have tested positive in the last 10 days, and ensuring anyone developing those symptoms during the school day is sent home, are essential actions to reduce the risk in schools and further drive down transmission of coronavirus (COVID-19). All schools must follow this process and ensure all staff are aware of it.  A-symptomatic testing for all staff working at the Centre started on 01/02/2021. For details, see separate risk assessment: Lateral flow testing.	EHT, HOC< Duty Managers	ongoing	4	2	12

		<p>who have someone in their household who does, do not attend school</p>	<p>All suspected cases of COVID 19 are recorded on the suspected case record, this is updated once test results are confirmed. To ensure children are not admitted back into the Centre before evidence of negative test / completed isolation period: when the reason for absence is COVID related, this is marked on the register- practitioners admitting children into the base check the register to make sure they are aware of any suspected cases. Staff confirm with the duty manager that it is safe for the child to return to nursery before allowing them into the Centre.</p> <p>Parents are advised to seek advice from the duty manager at the Centre before bringing their child, if they are unsure if their child is well enough to attend. Any matters that arise at drop off (such as a child who has had medicine before coming to nursery) are raised with the duty manager who will have a discussion and make a decision with the parent before the child enters the building.</p> <p>Briefing paper for parents provide clear instruction not to attend the Centre if any household member has symptoms; what will happen if a child develops symptoms whilst at the centre; safe practice whilst attending the centre.</p> <p>If anyone in the school becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), The duty manager must be informed straight away, they then follow the Protocol for responding to a person who has symptoms of COVID 19 whilst at the Centre. People with suspected cases must be sent home and advised to follow '<a href="#">stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection</a>', which sets out that they must self-isolate for at least 10 days and should <a href="#">arrange to have a test</a> to see if they have coronavirus (COVID-19). Other members of their household (including any siblings) should self-isolate for 10 days from when the symptomatic person first had symptoms.</p> <p>If a child is awaiting collection, they will be moved to a room where they can be isolated behind a closed door, a staff member will provide supervision (the key person where possible /familiar adult). 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. The meeting room is the centres designated isolation room, while regular use still continues- use as the isolation room takes priority, so meetings / non-contact time may be interrupted so the</p>					
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			<p>room can be used.</p> <p>If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.</p> <p>PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the <a href="#">safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE)</a> guidance.</p> <p>As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital.</p> <p>Any members of staff who have helped someone with symptoms and any pupils 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 and Trace.</p> <p>Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household bleach after they have left to reduce the risk of passing the infection on to other people. See the <a href="#">COVID-19: cleaning of non-healthcare settings guidance</a>. Cleaning will be carried out as soon as possible, with the isolation room being out of use until it has been cleaned and the bases being cleaned at the earliest opportunity. Items known to have been touched by the person with symptoms will be removed for cleaning, It is not necessary to evacuate the base for immediate cleaning.</p> <p>Public Health England is clear that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (COVID-19)</p>					
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			<p><b>Side effects of children taking a vaccination or teething:</b> Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (COVID-19) is suspected.</p> <p>Whilst teething can cause some known side effects such as flushed cheeks and sore gums, <a href="#">NHS guidelines</a> state that fever is not a symptom of teething.</p> <p>Parents and carers should monitor side effects from a vaccination or teething, and if they are concerned about their child's health, they should seek advice from their GP or NHS 111.</p> <p>If coronavirus (COVID-19) is suspected, settings should follow the advice in the system of controls.</p>					
Poor hygiene increases the likelihood of infection	Pupils, staff and visitors. Risk of CV19 infection.	2. Clean hands thoroughly more often than usual	<p>Ensure that pupils clean their hands regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating. Regular and thorough hand cleaning is going to be needed for the foreseeable future.</p> <p>Points to consider and implement:</p> <ul style="list-style-type: none"> <li>• whether the school has enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly</li> <li>• supervision of hand sanitiser use given risks around ingestion. Small children and pupils with complex needs should continue to be helped to clean their hands properly. Skin friendly skin cleaning wipes can be used as an alternative</li> <li>• building these routines into school culture, supported by behaviour expectations and helping ensure younger children and those with complex needs understand the need to follow them</li> </ul>	Teachers & Practitioners	ongoing	3	3	9
Poor respiratory hygiene increases the likelihood of infection	Pupils, staff and visitors. Risk of CV19 infection.	3. Ensure good respiratory hygiene by promoting the 'catch it, bin	<p>Ensure that they have enough tissues and bins available in the school to support pupils and staff to follow this routine. As with hand cleaning, schools must ensure younger children and those with complex needs are helped to get this right, and all pupils understand</p>	Site Manager		3	3	9

		it, kill it' approach	<p>that this is now part of how school operates. Used tissues must be placed in bins with a lid.</p> <p>Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and the staff working with them, and is not a reason to deny these pupils face to face education.</p> <p>Public Health England does not (based on current evidence) recommend the use of face coverings in schools. This evidence will be kept under review. They are not required in schools as pupils and staff are mixing in consistent groups, and because misuse may inadvertently increase the risk of transmission. There may also be negative effects on communication and thus education.</p> <p>Face coverings are required at all times on public transport (for children over the age of 11) or when attending a hospital as a visitor or outpatient.</p>	Teachers / Practitioners					
Poor cleaning routines and implementation means that the virus is present on surfaces in the school.	Pupils, staff and visitors. Risk of CV19 infection.	4. Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach	<p>Continue cleaning schedule that ensures cleaning is generally enhanced and includes:</p> <p>more frequent cleaning of rooms / shared areas that are used by different groups</p> <p>frequently touched surfaces being cleaned more often than normal</p> <p>different groups don't need to be allocated their own toilet blocks, but toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet</p> <p>Public Health England have published revised guidance for cleaning non-healthcare settings to advise on general cleaning required in addition to the current advice on <a href="#">COVID-19: cleaning of non-healthcare settings guidance</a>.</p>	Site Manager Cleaning staff	ongoing	3	3	9	
Pupils are in contact with too many other pupils throughout the	Pupils, staff and visitors. Risk of CV19 infection.	5. Minimise contact between individuals	<p><b>Organising groups of children:</b> Wherever possible children will be grouped in class bubbles with their own allocated inside and outside space for their continuous provision. They will enter and leave via</p>	HoC, Child care co-ordinator Site Manager		3	3	9	



<p>school, exposing the entire school population to CV19.</p>		<p>and maintain social distancing wherever possible</p>	<p>allocated doors.</p> <p>Children may move around the centre where required to ensure operational needs are met</p> <p>Badgers &amp; Foxes will have breakfast and lunch in the hall. The use of packed lunches will be stopped and parents will have the option to purchase a hot lunch. Children will be kept in their class bubbles as much as practicably possible, including class specific tables for meals and dividing the hall /Badgers room so that children can play and eat in their bubble. The hall will be cleaned after each use.</p> <p>Hedgehogs and Foxes children will move across to Badgers from 4-6</p> <p>Rabbits children will remain in their room throughout the day. The soft room will be used exclusively by Rabbits, but the balls from the ball pit will be removed and the equipment will be cleaned after each use.</p> <p>Outside spaces such as the woodland and allotment will only be used by one base at a time.</p> <p>Use of outside space will be optimised, including using outside routes when moving children from one base to another when possible.</p> <p><b>Access to the Centre:</b> The car park will be closed between 8.30 – 4.30 during term time (parents will be able to use the carpark outside of these times.)</p> <p>Walking routes around the Centre will be used and all families / visitors will be reminded to adhere to social distancing (signs &amp; markings on pavements in place)</p> <p>Each base will have a designated entry/ exit point to the centre.</p> <p>Badgers children will be dropped off / collected via the gate to the lower garden. Between 4-6pm two to four year (day care) olds are</p>	<p>Teachers / Practitioners admin team</p>				
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			<p>collected via the yellow door.</p> <p>Foxes children will be dropped off / collected via yellow door.</p> <p>Rabbits children will be dropped off / collected via white doors to parents room</p> <p>Hedgehogs children will be dropped off / collected via blue gate to Hedgehogs garden.</p> <p>Any adults entering the Centre will be asked to wear a face covering.</p> <p>Staff are vigilant and make sure that only authorised adults are receiving children (i.e. when wearing face coverings as identity may be obscured).</p> <p>Ask parents arriving early to wait in either front garden or garden area outside hedgehogs and to maintain social distancing.</p> <p>Parents should not enter the building unless they have an appointment.</p> <p>Reception is open for 1 adult visitor at a time. (including parents). Visitors are asked to sanitise their hands on arrival and wear a face covering, staff remind people as necessary to maintain social distancing.</p> <p><b>Starting nursery:</b> Perspective parents wishing to visit the centre may be offered an outside tour to see the grounds in areas where children and staff are not present. This may include entering the base for their child's age group if this can be accommodated without children present and prior to the base being cleaned before its next use. Parents are issued with a briefing paper that details their role in following the system of controls prior to the visit. No visits will be offered during national lockdown.</p> <p>Settling in sessions: working with young children, it is important to support their transition into nursery and enable a secure secondary attachment to develop between the child and their key person. All children will be invited to attend a visit with their key person accompanied by 1 parent / carer. Thereafter, a plan for individual</p>					
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		<p>support may be agreed based on the needs of the child. Sessions where the parent / carer stay with the child in the base will be limited to an hour. A concentrated effort is made to reduce the number of times a parent / carer comes into the base with their child.</p> <p>At settling in sessions when the parent leaves the child for a short time, parents are asked to wait in a safe place outside of the building (such as their car) if this is available. If the parent area is required, this is limited to 1 adult at a time and the area must be sanitized after use. (Base leader to agree and organise this)</p> <p>Adult visitors to be briefed re control measures prior to settling in visits, which are:</p> <ul style="list-style-type: none"> <li>- All visitors wash their hands on arrival.</li> <li>- Social distancing between adults maintained throughout</li> <li>- Minimise shared environments, utilise the garden areas and outdoor walking routes as much as possible throughout the visit</li> <li>- Adult visitors to wear face covering whilst inside. (include explanation why staff do not wear face coverings)</li> <li>- Adult visitors to minimise handling toys and resources</li> </ul> <p><b>Office space</b></p> <p>The main office is limited to 2 people maximum. The reception window is used for discussions with admin staff to minimise the number of people coming into the office area. This includes asking the admin team for I-pads / stationary / files etc.</p> <p>Staff wishing to use the hot desk in the main office or 2 smaller offices must book this in advance. Additional space for admin tasks includes the meeting room &amp; staff room. A laptop is available for staff to book for more flexible use.</p>					
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			<p><b>Resources</b></p> <p>Staff should use their own pens etc.</p> <p>Each class to use their own allocated resources. Resources to be cleaned frequently with records kept.</p> <p>Books brought back from home should be kept in a separate box for 72 hours before using again. A record must be kept of all books going home.</p> <p>Resources used between rooms- such as OWL toolkits, must be cleaned frequently and meticulously and always between bubbles.</p> <p>Outdoor play equipment must be cleaned more frequently and records kept.</p> <p>Malleable play (messy play): activities that involve malleable materials for messy play such as sand, mud and water are handled by a small, consistent group of children of no more than 15 at a time, no one else outside this group can come into contact with it. Materials used must be cleaned or replaced each week and always between bubbles. Children wash their hands thoroughly before and after messy play. Frequently touched surfaces, equipment, tools and resources for messy play are thoroughly cleaned and dried before they are used by a different group.</p> <p>The metal / plastic outdoor fixed play equipment (climbing frame and drums) must be sanitised (milton spray) before and after each use.</p> <hr/> <p><b>Staff information:</b></p> <p>All practitioners can operate across different bases in order to meet the operational needs of the centre. Efforts will be made to minimise this as much as possible. Where staff need to move between rooms, they must wash their hands thoroughly before starting to work in another room.</p>					
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		<p>Where staff are working in a different base to usual, or a member of cover staff is working in a base, this will be recorded on the register for that day, so that an accurate record of staff in close contact with different children is maintained.</p> <p>Ideally, adults should maintain 2 metre distance from each other at all times. Classrooms are large, so there should be very limited instances when staff are unable to maintain this distance. Numbers are limited in staff rest areas to ensure there is enough space to maintain 2 metre distance and the narrow corridor by the admin office has a one-way system in place. There may be times, such as a meeting, when it is not possible for adults to maintain 2 metre distance from each other, At these times, adults should wear a face covering.</p> <p>Staff breaks are staggered as much as possible. Continue with additional kitchen area /rest area for staff use (between Rabbits and Hedgehogs)</p> <p>Staff to bring own lunch / snacks to avoid unnecessary trips to the shop from families.</p> <p>From 02/11/2020 staff will wear a face covering / visor for handover discussion with parents / carers at drop off / collection. Parents / Carers will also be asked to wear a face covering from the point of entering the centre gate.</p> <p>Staff sharing transport must wear a face covering when travelling in the vehicle</p> <p>Staff will do their best to reduce close contact with the children in their base / bubble. We know that this is not always possible, particularly when working with younger children, but if adults can do this when circumstances allow that will help. In particular, they should avoid close face to face contact and minimise time spent within 1 metre of anyone. Similarly, it will not be possible when working with many pupils who have complex needs or who need close contact care. These pupils' educational and care support should be provided as normal.</p> <p>Staff members from the Central team will minimise the time spent in the bases and will make every effort to maintain 2 metre distance from the children. If staff are unable to maintain the 2 metre distance, Face coverings must be worn by staff who are not delivering direct care &amp;</p>					
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			<p>education to the children.</p> <p>Safe wearing of a face covering requires sanitising hands before and after touching, including to remove or put them on. Face coverings must be stored in individual sealable plastic bags between use. Face coverings must only be handled by the person wearing them. The process for the removal and disposal of face coverings for staff who use face coverings prior to their arrival at the Centre are detailed here: <a href="https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own">https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own</a></p> <p>Signage is displayed detailing how to safely wear a face covering.</p> <p>Agency staff will be asked to wear a visor when working at the Centre. The Centre will confirm when booking that agency staff can wear a face covering.</p> <p>All staff (except for those who are exempt) will wear a face covering when they are in communal areas such as corridors and kitchens.</p> <p>Guidance on <a href="#">safe working in education, childcare and children's social care</a> provides more advice.</p> <p>Staff who test positive must inform the Centre ASAP so that arrangements can be put into place at the earliest opportunity.</p> <p>Work stations: When staff use a work station, they must sanitise their hands and all touch points (keyboard, mouse, phone etc.) before and after their session.</p> <p>A separate risk assessment is in place for staff working across two settings.</p> <p><b>Other considerations</b></p> <p>Some pupils with SEND (whether with education, health and care plans or on SEN support) will need specific help and preparation for the changes to routine that this will involve, so teachers and special educational needs coordinators should plan to meet these needs, for example using social stories.</p> <p>Supply teachers, peripatetic teachers and/or other temporary staff can move between schools. They should ensure they minimise contact and maintain as much distance as possible from other staff. Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual. Schools should</p>					
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			<p>consider how to manage other visitors to the site, such as contractors, and ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors.</p> <p>Where a child routinely attends more than one setting on a part time basis, for example because they are dual registered at a mainstream school and an alternative provision setting or special school, schools should work through the system of controls collaboratively, enabling them to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the child.</p> <p>Equipment and resources are integral to education in schools. For individual and very frequently used equipment, such as pencils and pens, it is recommended that staff and pupils have their own items that are not shared. Classroom based resources, such as books and games, can be used and shared within the bubble; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles.</p> <p>Outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers. It is still recommended that pupils limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery. Bags are allowed. Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided, especially where this does not contribute to pupil education and development. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.</p>					
Unavoidable, direct contact leads to the spread of infection.		6. Where necessary, wear appropriate personal protective equipment	<p>The majority of staff will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:</p> <p>where an individual child or young person becomes ill with coronavirus</p>	HoC Practitioner staff team	ongoing	3	3	9

		(PPE)	<p>(COVID-19) symptoms while at school, and only then if a distance of 2 metres cannot be maintained</p> <p>where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used</p> <p>Senior staff will understand and implement the guidance on <a href="#">safe working in education, childcare and children's social care</a> for more information about preventing and controlling infection, including when, how PPE should be used, what type of PPE to use, and how to source it.</p>					
Infections identified in school spread to the wider community.		7. Engage with the NHS Test and Trace process	<p>All leaders must ensure they understand the NHS Test and Trace process and how to contact their local <a href="#">Public Health England health protection team</a>. Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:</p> <p><a href="#">book a test</a> if they are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit</p> <p>provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace</p> <p><a href="#">self-isolate</a> if they live with someone who develops coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19)</p> <p>Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS <a href="#">testing and tracing for coronavirus website</a>, or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing.</p> <p>If staff are unable to access a test online, they should contact The Centre straight away, for further assistance.</p> <p>Schools should ask parents and staff to inform them immediately of the</p>	EHT/HoC Duty managers	ongoing	5	2	10



			<p>results of a test:</p> <p>if someone tests negative, if they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can stop self-isolating.</p> <p>if someone tests positive, they should follow the <a href="#">‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’</a> and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because 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 keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 10 days.</p> <p>Symptomatic people are not allowed back into the Centre until they have received a negative test or completed the period of self-isolation (this is currently 10 days, beginning the day after symptoms started).</p> <p>All visitors to the Centre are asked to scan the NHS Test and Trace QR code on arrival.</p>					
Poor control measures lead to rapid infection across bubbles.		8. Manage confirmed cases of coronavirus (COVID-19) amongst the school community	<p>We will take swift action when we become aware that someone who has attended has tested positive for coronavirus (COVID-19). The duty manager must be informed straight away and will follow the following steps:</p> <ul style="list-style-type: none"> <li>• Send home the “bubble” that the person has come into contact with, whilst awaiting further advice from the DFE Coronavirus helpline/ PHE.</li> <li>• Contact Public Health England’s (PHE) dedicated advice service, delivered by NHS Business Services Authority. The service is for those needing support on the action they should take when they have been informed of a confirmed case of coronavirus (COVID-19) in their setting (i.e. a pupil or staff member testing positive).</li> </ul> <p><b>Department for Education coronavirus (COVID-19) helpline: 0800 046 8687 and select option 1 to report a positive test</b></p>	EHT HOC duty managers	ongoing	3	3	9

			<p><b>within the setting.</b></p> <p>Opening hours: Monday to Friday from 8am to 6pm</p> <p>Saturday and Sunday from 10am to 6pm</p> <p>This will take you through to a dedicated team of NHS Business Services Authority advisors who will work through a risk assessment with you to identify close contacts, and will inform you what action is needed based on the latest public health advice. Advisors will be responsible for referring more complex cases to the PHE regional health protection team, as necessary, following a triaging of the circumstances during the call.</p> <p>When you call for advice, please have the following information to hand relating to the positive coronavirus (COVID-19) case in your setting as you will need to discuss this with the call adviser:</p> <ul style="list-style-type: none"> <li>• The number of positive cases in the setting, whether the person who tested positive is displaying symptoms and if so, the date of the onset of the symptoms (if known)</li> <li>• The dates that the person who tested positive was in attendance at the setting so that we can identify if the person was infectious whilst on site</li> <li>• Records of any definite face to face contact with the individual. (This is recorded on the registers staff deployment docs)</li> </ul> <p><b>The Local Authority and Ofsted must also be notified of a confirmed case within the setting.</b></p> <p>The health protection team will work with schools in this situation to guide them through the actions they need to take. Based on the advice from the health protection team, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 10 days since they were last in close contact with that person when they were infectious. Close contact means:</p> <p>direct close contacts - face to face contact with an infected individual</p>					
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		<p>for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin)</p> <p>proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual</p> <p>travelling in a small vehicle, like a car, with an infected person</p> <p>The health protection team will provide definitive advice on who must be sent home. To support them in doing so, we will keep a record of pupils and staff in each group, and any close contact that takes places between children and staff in different groups (see <a href="#">section 5 of system of control</a> for more on grouping pupils). This should be a proportionate recording process. Schools do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome.</p> <p>A template letter will be provided to schools, on the advice of the health protection team, to send to parents and staff if needed. Schools must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.</p> <p><b>Household members of those contacts who are sent home</b> do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within their 10-day isolation period they should follow '<a href="#">stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection</a>'. They should get a test, and:</p> <p>if the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days.</p> <p>if the test result is positive, they should inform their setting immediately, and must isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 10-day isolation period). Their household should self-isolate for at least 10 days from when the symptomatic person first had symptoms, following '<a href="#">stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection</a>'</p> <p>Parents and staff must email: <a href="mailto:reception@hardmoor.co.uk">reception@hardmoor.co.uk</a> if they</p>					
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			<p>receive a positive test result during <b>out of centre opening hours</b> and a duty manager will check this periodically. We will notify staff and families of the relevant bubble in a timely manner.</p> <p>People who have been in close contact with a person who has tested positive must complete the 10 day isolation before coming back to the centre.</p> <p>Further guidance is available on <a href="#">testing and tracing for coronavirus (COVID-19)</a>.</p>					
Poor communication with local public health officers lead to uncontrolled outbreaks.		9. Contain any outbreak by following local health protection team advice	<p>If the school has two or more confirmed cases within 10 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak, and must continue to work with their local health protection team who will be able to advise if additional action is required.</p> <p>In some cases, health protection teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – perhaps the whole site or year group. If schools are implementing controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole school closure based on cases within the school will not generally be necessary, and should not be considered except on the advice of health protection teams.</p> <p>In consultation with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person’s class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.</p>	EHT, HoC		1	1	1
Higher staff absence puts pressure on service continuity.	Children’s safety is at risk if statutory ratios are not maintained.	Existing protocol for covering staff absence	<p>The Centre is updating the record of parents / carers who are key workers. Vulnerable children are identified as those with SEND or support from Children’s Social care. This will help the Centre to be organised in the instance of a lock down where EY settings are closed to most children by the Government, as well as preparing for an incident of high staff absence.</p> <p>A risk assessment has been undertaken for pupils who have additional</p>	Childcare Co-ordinator  SENDCo	ongoing	3	4	1 2

		<p>support staff for SEND to determine if they will be safely cared for on a higher ratio in the instance that the centre is unable to cover their 1:1 support. Children who are unable to safely access the Centre without their 1:1 support may have to miss a session or period of time until cover is arranged. The outcome of this risk assessment is recorded on the SEND register.</p> <p>Should absence levels be high enough that the Centre is unable to meet the statutory ratio to care for all children. Children may have their space temporarily suspended, until safe staffing levels are resumed. Priority for spaces will be given in the following order:</p> <ul style="list-style-type: none"> <li>• Children of Key workers &amp; Vulnerable children</li> <li>• 3 &amp; 4 year olds in particular, those who will be transitioning to Reception.</li> <li>• Day Care children</li> <li>• Funded 2 year olds</li> </ul> <p>Every effort will be made to avoid these measures and for any such measures to be for as short a period as possible.</p> <p>Further information is available in the Centre's Business Continuity Plan, including cover arrangements / duties for distribution for the Central staff team.</p>	HoC / EHT					

