

School 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: 14th full review 1 November 2021

Next review date: This risk assessment is a live document and updated as new guidance is issued. Updates are highlighted in yellow

Date of review by governing body: 25 November 2021

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
		Impact				

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:

You should:

- 1) ensure good hygiene for everyone
- 2) maintain appropriate cleaning regimes
- 3) keep occupied spaces well ventilated
- 4) follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.

Our **School Contingency Framework** outlines the principles of managing a school or local outbreaks of COVID-19.

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 who have someone in their household who does, do not attend school	<p>Ensuring that pupils, staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, 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.</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), they must be sent home and advised to follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection', which sets out that they must self-isolate for at least 10 days and should arrange to have a test to see if they have coronavirus (COVID-19). Individuals are not required to self-isolate if they live in the same household as someone with COVID-19, or are a close contact of someone with COVID-19, and any of the following apply:</p> <ul style="list-style-type: none"> • they are fully vaccinated • they are below the age of 18 years and 6 months • they have taken part in or are currently part of an approved COVID-19 vaccine trial • they are not able to get vaccinated for medical reasons <p>Staff are advised to take a PCR test if a member in their household tests positive.</p> <p>If a child is awaiting collection, they should be moved, if</p>	EHT HoC	Dynamic risk assessment - ongoing	3	3	9

			<p>possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, 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. The meeting room is the designated area in the Centre.</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 safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) 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 provided close contact care for someone with symptoms and all other staff or 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, or they have tested positive from an LFD test as part of the school's programme of testing. Individuals who are contacted by the NHS Test and Trace service or local health protection and told to self-isolate have a legal obligation to do so.</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 and disinfected using standard cleaning products after they have left to reduce the</p>					
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			<p>risk of passing the infection on to other people. See the COVID-19: cleaning of non-healthcare settings guidance.</p> <p>Side effects of children taking a vaccination or teething: 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, NHS guidelines 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>					
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 nursery, when they change rooms, after using the toilet 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"> • whether the school has enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly • 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 • 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 	Teachers & Practitioners	Ongoing	3	2	6
				Site manager				
				Teachers Practitioners				

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 it, kill it' approach	<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 that this is now part of how school operates. All spent tissues must be placed in lidded bins.</p> <p>Face covering: The choice to wear a face covering is optional. If there is an outbreak at the centre, it is recommended that that face covering should temporarily be worn in communal areas or where social distancing of 2 meters cannot be maintained.</p>	Site manager All staff	ongoing	3	3	9
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. Continue 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. Continue to use class cleaning schedule record throughout the day and store these in the base H & S file.</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 will publish revised guidance for cleaning non-healthcare settings to advise on general cleaning required in addition to the current advice on COVID-19: cleaning of non-healthcare settings guidance.</p>	Site manager cleaning staff	ongoing	2	3	6
Pupils are in contact with too	All Centre Users	Measures to support social distancing will continue to be	Access to the Centre: The car park will be closed between 8.30 – 4.30 during term time (parents will be able to use the	EHT / HoC, Child care		3	3	9

<p>many other pupils throughout the school, exposing the entire school population to CV19.</p>		<p>implemented.</p> <p>It is no longer recommended to keep groups apart as much as possible</p>	<p>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 & 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 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>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, staff remind people as necessary to maintain social distancing.</p> <p>Starting nursery: 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</p>	<p>co-ordinator Site Manager Teachers / Practitioners admin team</p>				
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			<p>base being cleaned before its next use. Parents will be briefed prior to the visit of these control measures.</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 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 may use the parent area if social distancing allows. If the parent area is required, this is limited to 2 adults 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"> - All visitors wash their hands on arrival. - Social distancing between adults maintained throughout - Minimise shared environments, utilise the garden areas and outdoor walking routes as much as possible throughout the visit - Adult visitors to minimise handling toys and resources <p>Office space</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 /</p>					
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			<p>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 & staff room. A laptop is available for staff to book for more flexible use.</p> <p>Resources</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, 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>					
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			<p>Staff information:</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> <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 sharing transport are advised to wear a face covering when travelling in the vehicle</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>New and expectant mothers have an individual risk assessment which takes into consideration COVID 19 risks.</p>					
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Unavoidable, direct contact leads to the spread of infection.	Staff	6. Where necessary, wear appropriate personal protective equipment (PPE)	<p>The majority of staff will not require PPE beyond what they would normally need for their work. Full 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 (COVID-19) symptoms while at schools, 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 safe working in education, childcare and children's social care 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>	EHT / HoC	ongoing	2	4	8
Poorly ventilated areas leads to spread of infection.	Pupils and staff	7.Keep occupied spaces well ventilated.	Opening external windows increases natural ventilation, and in addition, opening internal doors can also assist with creating throughput of air. External doors can also be opened where safe to do so. We will balance the need for increased ventilation while maintaining a comfortable temperature.	Site manager				
Infections identified in school spread to the wider community. Staff administer the LFD test incorrectly or not take the test.		8.Asymptomatic testing Engage with the NHS Test and Trace process	<p>Staff should undertake twice weekly home tests whenever they are on site until further notice. This will identify staff who are asymptomatic, thus preventing the spreading of the virus. Results are reported to NHS Test and Trace and the Centre. A positive case must be reported to the EHT immediately. Staff testing positive must book a PCR test and self-isolate. If the PCR test is negative self-isolation ends.</p> <p>All leaders must ensure they understand the NHS Test and Trace process and how to contact their local Public Health England health protection team. Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:</p> <p>book a test 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</p>	EHT / HoC		4	2	8

			<p>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>From Step 4, close contacts will be identified via NHS Test and Trace.</p> <p>Schools will continue to have a role in working with health protection teams in the case of a local outbreak. self-isolate if they have been in close contact 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 testing and tracing for coronavirus website, or ordered by telephone via NHS 119 for those without access to the internet.</p> <p>The Centre asks that parents and staff to inform them immediately of the 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. The negative test result must be a PCR test result and not a lateral flow test result. 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 ‘stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection’ 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.</p>					
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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 14 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>The centre must inform the Local Authority and Ofsted of confirmed cases of COVID 19</p>					
Emergency procedures (Fire alarm activations etc.) cause pupils and staff to come into close contact	Staff, pupils, visitors, contractors	Emergency evacuations are to take place following social distancing rules as far as is reasonably possible. Particularly at assembly areas.	Regular evacuation drills undertaken	S/MLT & Site Manager				
Communication	All Centre users		Staff to bring to the attention of the HT any issue that they feel is compromising their own safety or the safety of others.	All staff				
Business continuity	Higher staff absence puts pressure on service continuity.	<p>Children's safety is at risk if statutory ratios are not maintained.</p> <p>Existing protocol for covering staff absence</p>	<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 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</p>	<p>Childcare co-ordinator</p> <p>SENDCo</p>		3	4	1 2

