

Task/Activity	Covid-19 (Coronavirus) pandemic risk assessment	Location	ICP Nurseries

This risk assessment has been developed using government guidance:

- Coronavirus (COVID-19): implementing protective measures in education and childcare settings.
- Safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE)
- Planning guide for early years and childcare settings.
- Actions for early years and childcare providers during the coronavirus (COVID-19) outbreak

Hazard How could harm be caused?	Who could be harmed? Staff? Children? Parents? Visitors? Public?	Existing Controls What are we already doing to prevent harm?	Risk Rating High/Medium /Low	Additional Controls Needed? If YES, transfer to Action Plan This risk assessment will be further personalized to reflect the needs of each Nursery
Coming into contact and mixing with other individuals who may be unwell	Staff, Children, Parents, Visitors, Public	Minimise contact and mixing Ensuring that children, staff and other adults do not come into settings if they have coronavirus (COVID-19) symptoms or have tested positive in the last 7 days and ensuring anyone developing those symptoms during the day is sent home, are essential actions to reduce the risk in settings and further drive down transmission of coronavirus (COVID-19). All settings must follow this process and ensure all staff are aware of it. If children or adults have, or are showing symptoms of, coronavirus (new continuous cough or high temperature of 37.8 degrees centigrade or higher, or a loss of, or change in, their normal sense	Low	



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		of taste or smell (anosmia)), or have someone in		
		their household who is, they should not be in a		
		childcare setting they must be sent home and		
		advised to follow the Guidance for Households With		
		Possible Coronavirus Infection.		
		Assessment of the localised data on the trend in		
		daily new cases assists with our risk assessment		
		measures for staff, parents and children.		
		All staff as a sale and security as a six as a security as		
		All staff members must receive appropriate		
		instruction and training on infection control and risk		
		assessments within which they will be operate. All		
		staff to have completed Virtual College online		
		course, Prevent COVID-19.		
Arrivals and Departures	Staff, Children, Parents,	Arrivals and Departures	Low	
of children, parents, staff	Visitors, Public	As far as possible, parents and carers should not		
and visitors, which can		enter early years premises.		
enhance the spread of				
germs if appropriate		Front of house staff (members of the leadership		
protocol is not in place		team) must be deployed to ensure families are		
		supported with new arrangements as they arrive at		
		and leave nursery.		
		Front of house staff must consider the Ideas CTED!		
		Front of house staff must consider the 'door STEP'		
		risk assessment before commencing duties:		
		S: self, am I ready to open the door? Do I		
		have the resources I need to carry out the		
		task?		
		T: task; do I need to take the child from the		
		parent, or offer any other support to the		
		children, parents, staff as they arrive /		
		depart?		
		E: environment, have I carried out a visual		
		inspection of the area, got control over the		
		environment (door under my control for		



example, 2m markings on the approach to the door); P: people, have I ascertained that only one adult is accompanying the child, have I asked them ahead of opening the door if they are symptomatic, live with someone who is symptomatic. Drop off and collection arrangements will vary from
site to site, be dependent on numbers of children attending and accessibility to the site and building.
During arrivals and departures, measures to be taken should include adherence to social
 distancing guidelines: Open as many points of entry / exit to the nursery to avoid crowding as staff and families arrive / depart. Discourage parents from gathering at the nursery entrance and communal areas. Where queuing is taking place, use queue management systems such as floor markings
to maintain a safe distance. Limit drop off and pick up to 1 parent per family and stagger the timings where necessary. Siblings should be discouraged
from accompanying the parent. Parents are told their allocated drop off and collection times and the process for doing so, including protocols for minimising adult to adult contact (for example, which entrance to use)
Reduce contact time between staff and parents at drop off / pick up to less than 15 minutes.



To avoid where possible, touching parents
when physically handing over young, or
distressed children.
Arrange drop off and pick up of children at
the nursery entrance to avoid parents
entering the nursery unnecessarily
When parents are waiting to drop off or
collect their child, physical distancing
should be maintained in a safe area
'Drop and go' procedure put in to place
with more communication taking place via
telephone or video chat.
Parents are to leave promptly and move
away from the nursery boundaries whilst
maintaining social distancing guidelines.
At most sites, on site car parking spaces will
no longer be available to staff and parents,
and instead used to facilitate queues and
waiting space. Alternative arrangements
may be made where no safe, local parking
is available.
r droms may leave positerialis at mornosory
by prior arrangement with the nursery
management team.
Mangers must ensure that pushchairs are folded discourse and store of incomments are
folded down and stored in a way that
avoids them touching other children's
pushchair.
On arrival, parents must use the
antibacterial spray and disposable paper
towels provided by the nursery to wipe
down their buggy, before folding down.
Parents must wash or sanitise their hands
after wiping down their pushchair.
Car seats, scooters, bikes etc. must not be
left at the nursery.



Visits and Visitors	Staff, Children, Parents,	Visits and Visitors	Low	
attending the site which	Visitors, Public	13333 2333 133333		
heightens the risk of		Wherever possible, settings are encouraged to		
germs spreading		avoid visitors entering their premises.		
		In instances where settings need to use other		
		essential professionals such as social workers,		
		speech and language therapists or counsellors, or		
		professionals to support delivery of a child's EHC		
		plan, settings should assess whether the		
		professionals need to attend in person or can do so		
		virtually. If they need to attend in person, they		
		should closely follow the protective measures in the		
		setting, and the number of attendances should be		
		kept to a minimum. Where possible to do so, social		
		distancing should be maintained.		
		Confirmation is required from all visitors that they do		
		not have, or are showing symptoms of, coronavirus		
		(new continuous cough or high temperature of 37.8		
		degrees centigrade or higher, or a loss of, or		
		change in, your normal sense of taste or smell		
		(anosmia)), or have someone in their household		
		who is.		
		Where visits can happen outside of setting hours,		
		they should. A record should be kept of all visitors.		
		They should. A record should be kept of all visitors.		
		A Parent / Visitor / Contractor Health Declaration		
		must be completed by any Parent / Visitor /		
		Contractor entering the nursery premises.		
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		Tell children, parents, staff or any visitors, such as		
		suppliers, not to enter the nursery if they are		
		displaying any symptoms of coronavirus (COVID-19)		



Home visits to children and families must not take	
place. Instead other forms of communication,	
email, telephone and video calling should be used	
to maintain contact.	
All planned visits/outings in the community which	
involve large groups of people in enclosed spaces	
are suspended.	
All extra-curricular activities to be suspended.	
Where visits to the nursery are unavoidable, ensure	
all visitors and contractors coming to Nursery are	
asked to wash their hands or use the alcohol hand	
gel provided, including Central Office staff.	
Some people, for religious or personal preference	
do not use alcohol hand gel; in these instances,	
handwashing requirements must be adhered to.	
 Implement reduced physical contact/maintain	
social distancing wherever possible, e.g. do not	
greet visitors with close physical contact or	
handshakes or offer a reassuring hand on the arm	
or shoulder of an upset or worried adult.	
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Open day / evening events for prospective parents	
will be 'by appointment only' for one adult (no	
children / siblings) at a time. The Nursery must be	
unoccupied, and cleaning must take place	
between events.	
Visits/interactions with high risk groups, e.g. visits to	
Residential Care Homes are currently suspended.	



		Parent/Celebration/Internal Events are suspended until further notice. Please see Settling-in Policy Nursery Reopening for further details on settling new and returning children. Outings in the community The guidance document 'Actions for early years and childcare providers during the coronavirus (COVID-19) outbreak' was updated on 23 June 2020, and notes "6.4Settings should maximise use of private outdoor space, while keeping small groups of children and staff away from other groups. Childminders and early years providers may take small groups of children to outdoor public spaces, for example parks, provided that a risk assessment demonstrates that they can stay 2 metres away" Where nurseries wish to take children on outings in the community they must follow refer to the control measures outlined in the Risk Assessment for Outings in the Community.		
Large Group Sizes can maximizes the risk	Staff, Children	Group Sizes For children in early years settings, the staff to child ratios within Early Years Foundation Stage (EYFS) continue to apply. Nurseries will continue to use these to group children. From 20 July, early years settings will no longer be required to keep children in small, consistent groups within settings. Settings should still consider how they	Low	



can minimise mixing within settings, for example where they use different rooms for different age groups, keeping those groups apart as much as possible.
Unlike older children and adults, early years children cannot be expected to remain 2 metres apart from each other and staff. In deciding to bring more children back to early years settings the government have taken this into account. Nurseries should therefore work through the system of controls set out below and within this risk assessment. These are the set of actions early years settings must take. They are outlined in more detail below.
 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 settings Clean hands thoroughly more often than usual Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it'
approach Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents Minimise contact between groups where possible Where necessary, wear appropriate personal protective equipment (PPE) Engage with NHS Track and Trace Manage confirmed cases of coronavirus (COVID-19) amongst the setting community



9 Contain any outbreak by following local	
health protection team advice	
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Numbers 1 to 4 must be in place in all settings, all	
the time.	
Number 5 must be properly considered and settings	
must put in place measures that suit their particular	
circumstances.	
Number 6 applies in all specific circumstances.	
Numbers 7 to 9 must be followed in every case	
where they are relevant.	
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If children are unsettled or upset, and practitioners	1
should continue to be available to offer	
reassurance, comfort and support. The Key Person	
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should comfort the child by talking to them	
soothingly in an age appropriate manner, offering	
a calming touch to their shoulder, back or tummy,	
or cuddles if they are wanted and by trying to	
distract the child or engage them in play.	
It is still important to reduce contact between	
people as much as possible. Children and staff	
where possible, must only mix within their room	
group, and should stay away from other people	
and groups.	
Public Health England (PHE) is clear that if early	
years settings, do this, and crucially if they are also	
applying regular hand cleaning, hygiene and	
cleaning measures and handling potential cases of	
the virus as per the advice, then the risk of	
transmission will be lowered.	1
Where children attend more than one setting	1
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Mixed placements should be avoided as much as	
possible but if that is not possible then the nursery	
manager must discuss the parent's requests with	
them, and risk assess whether they are able to offer	
what is being asked for. If a parent has decided to	
use just one out of their usual 2 settings, then a	
decision will need to be made regarding which	
setting they will attend. If the other setting has	
stated that the child can only attend one setting,	
then nursery managers will need to liaise with the	
other setting.	
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Rotas and key groups must be planned each day,	
using the Staff Rota and Daily Key Group Planner ,	
and Document (new): <u>Group Deployment</u>	
(optional). Nurseries will ensure that:	
 Where possible, the presence of any 	
additional members of staff should be	
agreed on a weekly basis, rather than a	
daily basis to limit contacts.	
 as far as possible, room groups of children 	
should be supported by consistent staffing,	
and groups should remain as consistent as	
possible throughout the week.	
 children and adults are always in the same 	
room groups each day, and different room	
groups are not mixed during the day, or on	
subsequent days.	
 wherever possible children use the same 	
room in the setting throughout the day, with	
a thorough cleaning of the rooms at the	
end of the day.	
 Cushions or mats may be used to help 	
children to sit in their own space during	
group time activities.	
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While in general groups should be kept apart, brief,
transitory contact, such as passing in a corridor, is
low risk.
Children and adults should minimize contact and
mixing by altering, as much as possible, the environment and routines of the day (such as
staggered break times).
Contact and mixing should also be reduced by:
accessing rooms directly from outside where
possible
considering one-way circulation, or place a
divider down the middle of the corridor to
keep groups apart as they move through
the setting where spaces are accessed by
corridors
The environments are organised to maintain
space between activities
Unnecessary items are removed from the
setting where there is space to store it
elsewhere
staggering breaks to ensure that any
corridors or circulation routes used have a
limited number of children / staff using them
at any time
staggering mealtimes - children should
clean their hands beforehand and eat in
the groups they are already in. Groups
should be kept apart as much as possible
and tables should be cleaned between
each group.
Children should not bring their own drinking
cups and water bottles from home, these
must be provided by the nursery



children should be brought their lunch in	
their classrooms	
staggering staff lunch breaks	
Staff who go out for their breaks must,	
adhere to the government guidance,	
staying safe outside your home and wash	
their hands-on return	
ensuring that toilets do not become	
crowded by limiting the number of children	
or adults who use the toilet facilities at one	
time	
Changing units/mats organised for each	
room where needed	
Where possible, meetings and training	
sessions should be conducted through	
virtual conferencing.	
Different groups don't need to be allocated their	
own toilets, but toilets will need to be cleaned	
regularly and children must be encouraged to	
clean their hands thoroughly after using the toilet	
Where nurseries are registered on the Childcare	
Register, they may care for children aged 5 – 8	
years, where families cannot safely care for them at	
home, and no other childcare is available.	
Nurseries must take steps to reduce the use of	
shared resources:	
by limiting the amount of shared resources	
that are taken home and limit exchange of	
take-home resources between children and	
staff	
by seeking to prevent the sharing of toys	
and other resources where possible.	



 Shared materials and surfaces should be cleaned in between each group's use, and disinfected more frequently the use of communal soft toys, and musical instruments which are blown into is currently suspended Limited amounts of scissors, pens and pencils, paint brushes may be offered, but must be wiped down between use. 	
Outside Space	
Outside Space	
 Use outside space, where possible, as this can limit transmission and more easily allow for distance between children and staff Outdoor equipment should not be used unless the setting is able to ensure that it is appropriately cleaned between groups of children using it, and that multiple groups do not use it simultaneously. Use gazebos to offer shaded areas in the garden where children can play, eat and sleep. 	
Mealtimes	
Staff will fetch prepared food from the	
kitchen and bring it back to their rooms.	
All meals will be served within the rooms, or autdoor group, and sorved by staff from the	
outdoor area, and served by staff from the room.	
Children's self-service is currently	
suspended.	
There should be no more than 8 children at	
any meal table, and the table layout should	
allow a comfortable space between	
children.	



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	Crockery, cutlery, cups etc. must be
	supplied by the nursery, and not brought
	from home.
	Tables, chairs, the floor, must be cleaned
	before and after mealtimes.
	Sleep time
	Where space allows, children may sleep
	outside, in sheltered / shaded areas or
	Gazebos. Thermals and sleeping bags to be
	purchased fir cooler temperatures if
	needed.
	Sleep mats which are showing any signs of
	wear and tear, or exposed foam must be
	disposed of and new beds purchased.
	The sleep area must not be crowded. Sleep
	mats must be placed at least 30cm apart.
	Children must be positioned so that they are
	face to feet with the child laying on the
	neighbouring sleep mat.
	The floor on which the sleep mats are
	placed must be swept, and if needed
	mopped so that it is clean and free from
	debris.
	Children must be provided with clean,
	individual bedding and not share the same
	bedding or sleep surface with another child.
	Each child will have their own labelled sleep
	bag in which their bedding will be stored.
	Bedding must be washed at least weekly,
	unless soiled.
	Sleep mats must be cleaned daily, and must
	be sanitized after they have been
	contaminated (such as by vomit, mucous,
	blood, or toileting accidents)



		 Bedding must always be checked to ensure it is clean. Staff must never walk over beds that have been made up, and when supporting children to get ready for sleep staff must not sit on the beds / bedding in order to avoid the spread of germs. Sleep mats should have a designated floor side and designated sleeping side. The sleeping side of sleep mats cannot touch one another, the floor, or the floor-side of other children's sleeping surfaces. Sleep mats should be stored safely in a clean, dry place. Bedding or sleep surfaces used by the same children must be washed between use by each child. Within our rooms there are quiet carpeted rest areas with soft cushions where children can go if they wish to rest and relax at any time of the day. All cushions and blankets must be laundered at the end of each day. Staff rooms and offices The use of staff rooms and offices is staggered to limit occupancy where possible. Please see Risk Assessment Covid-19 Offices. 		
By not having Effective handwashing systems in place, will maximize the risk of contamination	Staff, Children, Parents, Visitors, Public	Promoting handwashing. Proper handwashing requires the following steps: 1: Moisten hands under running water 2: Apply soap 3: Rub hands for approximately 20 seconds out of the flow of water 4: Rinse hands 5: Dry hands with a clean disposable towel.	Low	



At minimum, these procedures must be followed by	
all children and staff at the following times:	
- Before / after handling food and eating	
- After toileting and nappy changing (staff	
and children)	
- Upon arrival and re-entering of the class	
- After dealing with bodily fluids (coughing,	
sneezing, nose wiping)	
- After touching objects that could spread	
germs such as bin lids or pets	
Bathrooms must be offer children adequate	
supplies of toilet tissue, sinks with liquid soap and	
paper towels. Bins, should ideally be pedal operated, must have lids and be emptied	
frequently.	
перетпу.	
Staff member assigned to refill soap dispensers	
throughout the day	
Display posters and infographics around the nursery	
to remind all of the importance of hand washing.	
Children should be supported in developmentally	
appropriate ways to understand the steps they can	
take to keep themselves safe including regular	
hand washing and sneezing into a tissue.	
Use photographs and visual prompts with children	
showing how to wash hands to reinforce	
understanding,	
Share stories and talk to children about the	
Share stories and talk to children about the importance of handwashing in key group times.	
importance of flandwastling in key group times.	



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		Create opportunities for greater independence by ensuring that hand-washing facilities are well resourced and with easy reach of the children, and that soap and paper towels are readily available.		
		Use songs as children wash their hands, to encourage them to wash for the appropriate amount of time (20 seconds). E.g. 'row, row your boat' and 'happy birthday' (sung twice). Share posters and videos with parents via social media and connect.		
		Encourage children to avoid touching their face, eyes, nose and mouth.		
		Ensure hand sanitizers are available at the entrance to the nursery and in each room.		
		Hand sanitizer may be used if hands are not visibly soiled, the product contains 70% alcohol, manufacturer's instructions are followed, and children are closely supervised.		
		Hand sanitizer must be stored out of reach of children. Hand cream will be supplied to staff.		
By not having appropriate Respiratory hygiene information clear for all parties and appropriate products	Staff, Children, Parents, Visitors, Public	Respiratory hygiene (catch it, bin it, kill it) Children should be taught the importance of not touching their mouth, eyes and nose, where possible.	Low	
available and in place to stop germs from spreading (catch it, bin it, kill it)		Adults must avoid touching their mouth, eyes and nose.		



Children and adults should cover their mouth and nose with disposable tissues when they cough or sneeze.	
If a tissue is not available, they should sneeze into the crook of their elbow, not into their hand.	
Dispose of tissues into a disposable rubbish bag and immediately clean children / adults' hands with soap and water or use a hand sanitiser.	
For older children, rooms should have a number of accessible 'hygiene stations'; these can be placed on a table or shelf and contain a mirror and which holds tissues and a rubbish bin. Children should be taught to look in the mirror as they learn to wipe their noses, before disposing of the tissues in the bin.	
Staff should supervise young children to ensure they wash their hands for 20 seconds, with soap and water or hand sanitizer	
Staff should ensure that help is available for children or adults who have trouble cleaning their hands independently	
Ensure that bins for tissues are emptied throughout the day.	
Where possible, all spaces should be well ventilated using natural ventilation (opening windows) or ventilation units	
Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation	



		Avoid the use of lifts unless essential. Bins must have lids and be emptied frequently.	
		Bins must have lids and be emptied frequently.	
,	Staff, Children, Parents, Visitors, Public	Clean surfaces that are touched frequently Clean and disinfect all areas and surfaces prior to reopening and if necessary, utilised pest control for	
increase the risk of contamination		insect infestations, particularly in the kitchen and/or food preparation areas.	
		To prevent the indirect spread of the virus from person to person, regularly clean frequently touched surfaces, such as: - door handles - handrails - tabletops - play equipment - toys - books - tables - chairs - highchairs - cots - sinks - toilets - light switches - bannisters - electronic devices (such as tablets, computers, phones) - outdoor equipment Staff made aware of additional cleaning responsibilities and briefed on infection control.	



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Staff to wear disposable or washing-up gloves and aprons for cleaning
Staff to use disposable cloths and warm soapy water followed by usual cleaning products. When cleaning, use the usual products, like detergents and those available from Gompels, as these will be very effective at getting rid of the virus on surfaces.
Cleaning pods to be set up and MUST be stored out of children's reach around the setting both inside and out. Assign staff to key areas for cleaning at the end of each session
The use of soft toys and toys with intricate parts or that are otherwise hard to clean should be avoided.
Rugs may be used and cleaned at the end of each day with a steam cleaner / steam mop.
Toys will need to be kept well organized. There should be sufficient resources to allow for some that are in use, being cleaned, and drying.
Areas such as Superhero caves should be removed from sites.
Blankets and cushions may be used if they can be laundered each day. There should be sufficient to allow some that are in use, being cleaned, and drying.
Children may bring transitional objects such as comforters, blankets, soft toys or photographs of



family members and pets to help provide comfort and security while they settle into the nursery routine. Where possible they should be left nursery and cleaned each evening. Any fabric comforters or soft toys brought from home, must be laundered each evening, before being returned to nursery the next day.

The use of the Comfort Approach is currently suspended.

Cleaning outdoor equipment

Washing loose parts play and equipment: Wiping, immersion, steam cleaning or 72-hour exclusion are the recommended processes for cleaning of play equipment, equipment, or loose parts.

Cleaning with a cloth is the same protocol as indoors, where desks, handles, seats etc will be wiped down with a suitable dilution of a cleaning fluid.

If possible, fabrics such as tarpaulins or den building can be steam cleaned.

'Hard to clean' items such as hoops, tennis balls, fabric, sticks etc. can be fully immersed and hung to dry using a large bowl or sink, filled with a suitable dilution of a cleaning fluid.

Waterproofs, wellies and personal equipment: Children should not share personal equipment such as clothes and wellies Disinfectant will break down waterproofing, and therefore pure soap flakes should be used only.



		Deliveries Boxes holding deliveries should be cleaned before being brought into the nursery or opened outside and the contents transported into the nursery. Packaging must be disposed of as quickly as possible. Follow the ICP Nurseries Cleaning Checklists.	
By not having appropriate Laundry facilities and personal hygiene not being maintained. Will increase the risk of higher contamination and germs spreading	Staff, Children, Parents	Clothing, Laundry and Personal Hygiene There is no need for anything other than normal personal hygiene and washing of clothes following a day in an educational or childcare setting. • All staff should wear clean uniform for each shift when caring for the children. • There is no longer a requirement for staff to change into their uniform when they arrive at the Nursery each day. • Uniforms should be washed at the maximum temperature that the fabric will tolerate. • Do not shake dirty laundry Please see Standards of Appearance Guidance Children • Children must wear clean clothing daily • Where possible, children should avoid wearing shoes with shoelaces. Jewellery • No wrist Jewellery is permitted • No rings are permitted except a wedding band	



By not having	Staff, Children, Parents	Personal protective equipment (PPE)	Low	
appropriate Personal		The majority of staff in childcare settings will not		
protective equipment		require PPE beyond what they would normally		
(PPE) available for use to		need for their work, even if they are not always		
all parties could increase		able to maintain distance of 2 metres from others.		
the risk of germs				
spreading more quickly		PPE is only needed in a very small number of cases: - children whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way		
		PPE should be worn if a distance of 2 metres cannot be maintained from any child or adults displaying coronavirus symptoms		
		PPE for tasks involving changing nappies or general		
		care for babies Staff should follow their normal practice when changing nappies and caring for babies more generally, provided the child is not showing symptoms of coronavirus. This includes continuing to use the PPE that they would normally wear in these situations, for example aprons and gloves. If a child shows symptoms, they should not attend a childcare setting and should be at home.		
		Gloves must be removed and disposed of after every use.		
		Childcare settings should use their local supply chains to obtain PPE. Where this is not possible, and there is unmet urgent need for PPE in order to operate safely, they may approach their nearest local resilience forum.		
		Stock		



		 Stock check of essential supplies completed prior to opening e.g. gloves, aprons, hand soap, hand sanitiser, disinfectant, toilet rolls and tissues Stock levels will be monitored closely Supplies placed in each room for easy access to prevent staff leaving rooms for necessary equipment First aid box contents checked for stock and use by dates 		
		Please see ICP Personal protective equipment (PPE) policy for further details.		
If all parties are not being vigilant with signs and symptoms and are not getting Testing this will increase the risk of contamination/ germs spreading quicker	Staff, Children, Parents	Testing Access to testing is already available to all essential workers. This includes anyone involved in childcare Education settings, as employers, can book tests through an online digital portal. There is also an option for employees to book tests directly on the portal. Children will have access to a test if they display symptoms of coronavirus. If they develop symptoms, they should be tested. If they test negative, they can return to their setting and their fellow household members can end their self-isolation. If they test positive, education and childcare settings should follow guidance on implementing protective measures in education and childcare settings. To access testing parents will be able to use the 119 online coronavirus service. Contact Tracing	Low	



		The government has launched a new national test and trace programme. This will bring together an app, expanded web and phone-based contact tracing, and swab testing for those with potential coronavirus (COVID-19) symptoms. This programme will play an important role in helping to minimise the spread of coronavirus in the future. It will also include more traditional methods of contact tracing if a child or adults tests positive. This could include, for example, direct discussion with parents and schools or colleges on recent contacts. All staff working for ICP nurseries must register for the App, once available.	
By not having the correct measures in place to support and protect children with additional needs could put them at higher risk of becoming unwell and others around them	Staff, Children, Parents	Supporting vulnerable children and those with additional needs All existing vulnerable children must be encouraged to take up their nursery place from 1st June. Nursery manager / key person must check on the welfare of any child who does not attend on any day, as per the Recording and Monitoring Attendance (Children) procedure. Nursery manager to identify and plan how best to support high needs groups, including children with vulnerable children and disadvantaged children when the setting reopens. This should include full educational and care support for those children who have special educational needs and disabilities (SEND).	



Nursery manager to complete risk assessment for those children with an EHCP.	
If non-symptomatic children present behaviours which may increase the risk of droplet transmission (such as spitting), they should continue to receive care in the same way, including any existing routine use of PPE.	
To reduce the risk of coronavirus transmission, no additional PPE is necessary, but additional space and frequent cleaning of surfaces, objects and toys will be required.	
Cleaning arrangements should be increased in all settings, with a specific focus on surfaces which are touched a lot.	
Where children with special educational needs may not be able to understand the need for social distancing and may also seek close interaction with their peers or adults to provide reassurance at a period of disruption to their routines, it is imperative that childcare settings conduct risk assessments around managing groups of children within the setting. This should include limiting the number of children in each group and reducing this to provide more space in each classroom or learning area.	
As far as possible, room groups of children should be supported by consistent staffing, and groups should remain as consistent as possible throughout the outbreak.	
Some children will need additional support to follow the measures set out in this risk assessment (for	



		example, routes round school marked in braille or with other meaningful symbols, and social stories to support them in understanding how to follow rules).	
Children or adults who become unwell or there is a confirmed case of coronavirus in a setting, could spread the infection if procedures are not followed		Children or adults who become unwell or there is a confirmed case of coronavirus in a setting If anyone becomes unwell with a new continuous cough or high temperature of 37.8 degrees centigrade or higher, or a loss of, or change in their your normal sense of taste or smell (anosmia) in a childcare setting, they must be sent home and advised to follow the Guidance for Households with Possible Coronavirus Infection.	
		Please note, settings do not need to take children's temperatures every morning or throughout the day. Public Health England's guidance is that routine testing of an individual's temperature is not a reliable method for identifying coronavirus. Please see Covid-19 (Coronavirus) risk assessment - suspected / confirmed cases for more information.	
If we do not have the appropriate measures in place for our shielded and clinically vulnerable children and young people, they can be more at risk of the infection and become unwell	Staff, Children, Parents	Shielded and clinically vulnerable children and young people For the vast majority of children young people, coronavirus is a mild illness. Children and young people (0 to 18 years of age) who have been classed as clinically extremely vulnerable due to pre-existing medical conditions have been advised to shield. We do not expect these children to be attending nursery, and they should continue to be supported at home as much as possible.	
		Clinically vulnerable (but not clinically extremely vulnerable) people are those considered to be at a	



higher risk of severe illness from coronavirus. A small minority of children will fall into this category, and parents should follow medical advice if their child is in this category. All children who normally access childcare are strongly encouraged to attend so that they can gain the educational and wellbeing benefits of early education. The government now know much more about coronavirus (COVID-19) and so in the future there
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The government now know much more about coronavirus (COVID-19) and so in the future there
coronavirus (COVID-19) and so in the future there
will be far fewer children advised to shield
whenever community transmission rates are high.
Therefore, the majority of children will be able to
return to settings. Settings should note that:
a small number of children will still be unable
to attend in line with public health advice
·
because they are self-isolating and have
had symptoms or a positive test result
themselves; or because they are a close
contact of someone who has coronavirus
(COVID-19).
shielding advice for all adults and children
will pause on August 1st, subject to a
continued decline in the rates of community
transmission of coronavirus (COVID-19). This
means that even the small number of
children who will remain on the shielded
patient list can return to settings, as can
those who have family members who are
shielding.
if rates of disease rise in local areas, children
(or family members) from that area, and
that area only, will be advised to shield
during the period where rates remain high
and therefore may be temporarily absent
(see below)



		some children no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to the settings, usually at their next planned clinical appointment.	
By not having the appropriate measure in place for the shielded and clinically vulnerable adults they can be more at risk of the infection and become unwell,	Staff, Children, Parents	Shielded and clinically vulnerable adults Clinically extremely vulnerable individuals are advised not to work outside the home. We are strongly advising people, including education staff, who are clinically extremely vulnerable (those with serious underlying health conditions which put them at very high risk of severe illness from coronavirus and have been advised by their clinician or through a letter) to rigorously follow shielding measures in order to keep themselves safe. Staff in this position are advised not to attend work. Clinically vulnerable individuals who are at higher risk of severe illness (for example, people with some pre-existing conditions as set out in the Staying at home and away from others (social distancing) guidance have been advised to take extra care in observing social distancing and should work from home where possible. Childcare settings should endeavor to support this, for example by asking staff to support home learning. If clinically vulnerable (but not clinically extremely vulnerable) individuals cannot work from home, they should be offered the safest available on-site roles, staying 2 metres away from others wherever	



If a child or adult is Living with a shielded or clinically vulnerable person, and they have not taken the correct measures of protecting themselves they can spread the germs to the vulnerable making them unwell	Staff, Children, Parents	possible, although the individual may choose to take on a role that does not allow for this distance if they prefer to do so. If they have to spend time within 2 metres of other people, settings must carefully assess and discuss with them whether this involves an acceptable level of risk. Please note the government has updated its guidance for people who are shielding taking into account that coronavirus COVID-19 infection rates have decreased significantly over the last few weeks. On 22 June the government set out a series of steps for further relaxing shielding guidance which will come into effect on 6 July and 1 August. Please read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice. Living with a shielded or clinically vulnerable person If a child or a member of staff lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can attend their education or childcare setting. A risk assessment should be completed for Expectant Mothers, which includes additional measure in relation to social distancing. If a child or staff member lives in a household with someone who is extremely clinically vulnerable, as set out in the COVID-19: guidance on shielding and	
		someone who is extremely clinically vulnerable, as	



	in the case of children, they are able to understand and follow those instructions. This may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing.	
	If stringent social distancing cannot be adhered to, we do not expect those individuals to attend. They should be supported to learn or work at home.	



Transmission of germs if correct protocol is not in place and not being followed. Ensure Transport arrangements are preplanned.	Staff, Children, Parents	Transport arrangements Public transport From 15 June 2020, face coverings must be worn on public transport in England. A face covering is a covering of any type which covers your nose and mouth. Some people don't have to wear a face covering for health, age or equality reasons. Hands should be washed or sanitised before and after touching a face covering. Children under the age of three should not be wearing face coverings, however there is an expectation that those aged three and over will be wearing them if they can do so properly. Making sure staff. parents and children follow the Coronavirus (COVID-19): safer travel guidance for passengers when planning their travel ensuring that transport arrangements cater for any changes to start and finish times. Encourage staff. parents and children to cycle, walk or drive to their setting where possible e.g. face coverings, gloves, hand sanitiser.	Low	



Travel from overseas	Staff, Children, Parents	Exemptions to the global advice against nonessential travel On 4 July the government travel advice changed, with exemptions for travelling to certain countries and territories that no longer pose a high risk for British travellers. The government continue to advise against non-essential international travel, except to countries and territories listed. They also currently advise against cruise ship travel. The list of countries and territories exempt from advice against 'all but essential' international travel can be found here: https://www.gov.uk/guidance/coronavirus-covid-19-countries-and-territories-exempt-from-advice-against-all-but-essential-international-travel Return from travel Those returning will need to follow the rules for entering the UK. They must provide their journey and contact details up to 48 hours before they're due to arrive in the UK. Please see the rules for entering the UK: https://www.gov.uk/uk-border-control Travellers may have to self-isolate for the first 14 days they are in the UK. Please see the guidance for self-isolation when traveling to the UK:
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		They may not have to self-isolate when they arrive	
		from some countries and territories.	
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		Please refer to the travel corridors list for England:	
		https://www.gov.uk/guidance/coronavirus-covid-	
		19-travel-corridors	
		Please refer to the list of people who are exempt	
		from the English border rules:	
		https://www.gov.uk/government/publications/coro	
		navirus-covid-19-travellers-exempt-from-uk-border-	
		rules/coronavirus-covid-19-travellers-exempt-from-	
		uk-border-rules	
		<u> </u>	
Local restrictions: areas	Staff, Children, Parents	Please refer to the Local restrictions: areas with an	
with an outbreak of	Sidir, Crilidren, Fdrems	outbreak of coronavirus (COVID-19) guidance. This	
coronavirus (COVID-19)		provides a list of areas with additional local	
Colonavilos (COVID-17)		restrictions and Includes information for local	
		authorities, residents and workers about what to do	
		and how to manage the outbreak.	
		https://www.gov.uk/government/collections/local- restrictions-greas-with-an-outbreak-of-coronavirus-	
		covid-19#managing-local-outbreaks	