

Department: Education and Children's Services		RISK ASSESSMENT (ELC Settings)	Aberdeenshire COUNCIL 
Process/Activity: Infection Prevention & Control		Location: All ELCs Establishments	Date: 05.08.2020
Describe activity: Location of staff at ELC establishments open during Covid-19 outbreak. Staff providing childcare and access to sites.			
Fishermoss School Nursery		Reception Area is our isolation area	

THIS RISK ASSESSMENT NEEDS TO BE TAILORED TO EACH ESTABLISHMENT AND SHARED WITH ALL STAFF.

CONSIDER PUBLISHING ON THE SCHOOL'S WEBSITE.

Hazard	Person/s Affected	Risk	Risk level before controls are in place. (Highlight as appropriate)			Control Measures	Risk level after controls are in place. (Highlight as appropriate)		
			LOW	MED	HIGH		LOW	MED	HIGH
Spread of infection	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff, children and visitors				GENERAL CONTROL MEASURES The response to the coronavirus COVID-19 outbreak is complex and fast moving. Advice from Government sources will be shared with staff daily on the Aberdeenshire Council staff COVID-19 site: https://covid19.aberdeenshire.gov.uk/ Encourage and support all children, young people, staff and any others for whom it is necessary to enter the setting to maintain COVID-19 secure personal hygiene throughout the day and ensure continued rigour about hand hygiene. Frequent washing/sanitising of hands for 20 seconds and drying thoroughly, and always when entering/leaving the building, before/after eating and after using the toilet.	L		

					Encouraging children, young people and staff to avoid touching their faces including mouth, eyes and nose. Using a tissue or elbow to cough or sneeze and use bins that are emptied regularly for tissue waste. Staff on rota to check and empty bins. Provide supplies of resources including tissues, soap and hand sanitisers. Ensure all staff have access to the most up to date guidance and advice on COVID-19 from Aberdeenshire Council/Government and that this is implemented. Ensure changes in Policies/Procedures are recorded and shared. Keep a register of who has been informed. Identified Lead: Dawn Anderson/Natalie Munro Assign coordinator to ensure effective staffing ratio & cover at short notice Identified Lead: Dawn Anderson/Natalie Munro Named Child Protection Officer in ELC Setting Identified Lead: Margaret Ferguson/Dawn Anderson Identify those staff or pupils who are, or who live with someone who is, symptomatic or a confirmed case of COVID-19. They cannot return to setting until self-isolation is over, or a negative test is received. Set up clear, repeated messaging to parents/carers that pupils must not attend if they, or a member of their household, has COVID-19 like symptoms or a positive test. ELC Settings will be able to register symptomatic staff as Cat 3 Key workers under the employer referral portal to ensure priority access to testing. Identified Lead: Dawn Anderson/Natalie Munro – Remind parents/carers frequently through Family App, email, signage Have a location where potentially symptomatic pupils can be located until they can be collected. ISOLATION ROOM is located: Reception area			
Spread of infection	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff,	L	M	H SPECIAL CONSIDERATION FOR CERTAIN GROUPS: Records of Staff and Children who are clinically extremely vulnerable are accurate and up to date. Identified Lead is: Dawn Anderson/Natalie Munro From 1 August advice on shielding and protecting people who are clinically extremely vulnerable changed. Identify (and record that this has been carried out for every individual) all staff and children who are clinically extremely vulnerable with the HT/EYSP prior to them entering the setting.	L		

		children and visitors			https://www.gov.scot/publications/coronavirus-covid-19-tailored-advice-for-those-who-live-with-specific-medical-conditions/ **PLEASE NOTE THIS IS AN UPDATED LINK** ‘Clinically extremely vulnerable’ staff and children should be able to attend unless advice from their GP is not to. Those with a ‘clinically vulnerable’ household member can attend following a dynamic risk assessment. Those who are ‘clinically extremely vulnerable’ should discuss their options with their HT/DHT/EYSP. Those who live with someone ‘clinically extremely vulnerable’/shielded should attend and carefully follow guidance on staying alert and safe (social distancing) as per online guidance listed. https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/ Ensure that all clinically extremely vulnerable staff are enabled to work from home, (for example, supporting remote education), or where that is not possible, carry out the lowest-risk roles on site, with social distancing of at least 2m. Clinically extremely vulnerable staff electing to waive this right must have discussed it with their doctor and head teacher. Explore barriers to attendance with parents/ carers where there are concerns. Ensure up to date risk assessments for children on EHC plans, carried out with educational providers and parents/carers, to ensure child is at no more risk in the school setting than at home. All settings should follow the latest guidance on attendance for children, young people and staff who have health conditions or are pregnant, or who live with individuals who have health conditions or are pregnant. Information can be found here. https://www.gov.scot/publications/coronavirus-covid-19-tailored-advice-for-those-who-live-with-specific-medical-conditions/ Advice is available here for the education of children who are unable to attend nursery due to ill health. Schools will wish to maintain plans for remote education for some pupils. https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/			
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						Staff to adhere to health and safety guidelines. Clear information about individual. circumstances and meeting needs of children should be shared from current records on SEEMIS. Emergency contacts double checked and updated. Staff with relevant training in place: first aid, food hygiene etc to be identified and shared across setting. Plan to resume taking twice daily registration and record the appropriate absence codes both existing and COVID-19 related. Registration must be in accordance with Guidelines on Managing and Promoting Pupil Attendance in Nursery, Primary and Special Schools. Continue to complete the online educational setting status form to provide daily updates on how many children and staff are in the setting and school. (This is no longer the case and should be ignored) Ensure that there is always qualified First Aid Staff in ELC. If cover not available seek guidance from school SLT. Identify likely numbers of pupils returning and agree required staffing resource and approach and liaise with Early Years Team/QIO on your plans. Parents, carers, professionals, visitors, contractors will come on site by appointment only, unless in emergencies.			
Spread of infection. Infection of staff, children & visitors.	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff, children and visitors	L	M	H	BLENDED PLACEMENTS: (where a child attends two or more settings) See separate blended placement risk assessment if needed In order to minimise the number of contacts and risk of transmission, attendance at multiple ELC settings should be reduced as far as possible. A risk assessment will need to be created in consultation with the families and other setting concerned. All settings should have relevant contact details in order to share necessary information as required. For children who attend multiple settings, either ELC settings or childminders, consideration should be given to how they are supported to ensure good	L		

						hygiene practices (washing hands, not sharing resources, etc.) when moving between settings. Where a child attends more than one setting, consideration should be given to record keeping of the other setting(s), to assist with any Test & Protect process. Any records should be GDPR compliant. Guidance and Links: https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/blended-placements-provision-of-meals-and-snacks/			
Spread of infection. Infection of staff, children & visitors.	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff, children and visitors	L	M	H	PROTECTION WHEN MOVING AROUND THE DESIGNATED SCHOOL Staff and pupils reminded at each session of social distances rules. Consider the implementation of one-way systems to assist movement around your setting, school buildings and site. Clear signs displayed as reminders to staff and children regarding social distancing and handwashing. Review and update all Emergency Evacuation Plans (including PEEPS). Identify socially distanced Assembly Points. https://aberdeenshire.sharepoint.com/sites/Arcadia/services/Pages/Business%20Services/HR%20and%20OD/Health%20and%20Safety.%20Wellbeing%20and%20Risk%20Management/Health-and-Safety,-Wellbeing-and-Risk-Management.aspx https://aberdeenshire.sharepoint.com/sites/Arcadia/services/Documents/Business%20Services/HR+OD/Health%20and%20Safety/Aberdeenshire%20Council%20Corporate%20H+S%20Policy/Aberdeenshire%20Council%20-%20General%20HS%20Policy%20Statement.pdf	L	M	
People with symptoms attending ECS sites	Staff Children & young people Visitors	Infection of staff, children and visitors	L	M	H	GENERAL ADVICE -STAFF AND PUPILS Movement between settings should be kept to a minimum until further notice, e.g. temporary/supply staff, principal teachers, development workers, psychologists, nurses, and social workers. Consider lower risk methods for some input – digital/virtual means, or outdoor settings. Where movement across locations is necessary to deliver school operations the number of interactions should be minimised. (More information to follow on this area).	L		

						Consideration given to emergency evacuation procedures/ fire drill & muster point – adjustments to be made locally to emergency evacuation procedures to keep 2m separation where possible for staff. Drill practice to be carried out with staff and pupils lead by the HT/EYSP. However, when not a drill all people occupying the site should evacuate as quickly as possible (without panic) and then when at assembly point they can revert to physical distancing. Consider suggesting that staff hair tied back where appropriate and clothes changed daily. Children encouraged to also tie hair back.			
People with symptoms attending ECS sites	Staff Children & young people Visitors	Infection of staff, children and visitors	L	M	H	PEOPLE SYMPTOMATIC ATTENDING ELC ESTABLISHMENTS Remind staff, pupils and parents that they should not come the setting if they or someone in their household has developed symptoms (new persistent cough or increased temperature). Remind all staff and pupils of this each day. Guidance should be followed from NHS Inform and from Test and Protect here. Settings should ensure they understand this process and cases in settings, as complex settings, will be prioritised and escalated to specialist Health Protection Teams. https://www.nhsinform.scot/campaigns/test-and-protect Establishment to use existing methods and channels of communication with parents/carers to reduce the need for face to face meetings/contact: Expressions App; text; email; phone; Website; and other social media as used by the school. Remind all staff that if they or pupils develop symptoms, they should be sent home. Have a location where potentially symptomatic pupils can be located until they can be collected. Please access guidance here and see detailed information below. https://aberdeenshire.sharepoint.com/:w:/r/sites/covid-19childcarehubstaffinformation/_layouts/15/Doc.aspx?sourcedoc=%7B52A7F852-B8F6-485C-804F-265839BB5CEB%7D&file=School%20guidance%20on%20symptomatic%20or%20confirmed%20cases%20of%20Covid%2019.docx&wdLOR=c663CBE70-38B6-4FC5-9AFC-72A7C16515CF&action=default&mobileredirect=true	L		

						<u>Actions needed to be taken if a Case of COVID-19 has recently attended your Setting?</u> Adults who begin to show mild symptoms should return home and self-isolate, where possible avoiding public transport. Children who begin to show symptoms during session should be taken to an isolation room, preferably with a closed door. Windows to be open for ventilation. Tissues and foot pedal bin to be provided. Room identified should be supervised to avoid unnecessary distress to a child/ young person. Child should avoid touching people, surfaces, and objects. Ensure child coughs into tissue and disposes in bin. Parents/Carers called to collect from entrance of setting. Adult supervising child should try to keep 2m apart from child. If not possible PPE to be worn. Isolation Area to be cleaned as per procedures below.			
Spread of infection through attending setting	All Persons within Setting	Spread of Virus through person to person contact	LOW	MED	HIGH	SPECIFIC CONTROLS: LIMITING CHILDREN'S CONTACTS Contacts should be limited by managing children within groups. Consistency of groups is beneficial, and efforts should be made to keep children within the same groups for the duration of the day or session, where possible. More than one group can use a large space, but children should not mix freely with children in other groups, including in open plan settings. The management of groups should reflect the circumstances of the setting. The appropriate size of groups will depend on the age and overall number of children, and the layout of the setting. Children should be managed in groups up to 25 to 30 children. Children are not required to physically distance from each other, or from adults.	L		

						Adults within an ELC setting should adhere to the correct social distancing rules, always, including outdoors. Children with Additional Support Needs should be cared for in line with their Personal Plan. Staff members should work with the same groups where possible throughout the day, and a number of key workers may work together. Guidance and Links: https://creativestartlearning.co.uk/developing-school-grounds-outdoor-spaces/zoning-the-outside-space/ https://www.gov.scot/publications/coronavirus-covid-19-phase-3-guidance-on-reopening-early-learning-and-childcare-services/pages/risk-assessment-and-communication/ https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/limiting-childrens-contacts/			
Spread of infection. Infection of staff, children & visitors.	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff, children and visitors	LOW	MED	HIGH	PROTECTION WHEN DROPPING OFF AND PICKING UP FROM THE ESTABLISHMENT Signage and information added to the entrance of the setting site. Information shared on websites and social media. Individual physical distancing applies to staff, parents and any other adults who may attend the setting. Families will need to maintain a 2m distance at drop off and pick up. Only one adult to accompany child at drop off/pick up. Staggered or allocated drop offs/pick up times may be advantageous. Provide additional access/exit points to building. Maps and signs show direction of movement around the setting should be displayed Parents should not have access to inside the building (unless previously arranged) but procedures should be in place for parents to support if a child is distressed (outdoors).	L		

						Staff should meet children outside the building and accompany them into building to wash hands/sanitise. On entering the building, hand sanitiser should be made available and everyone should use this before moving to wash their hands thoroughly at the nearest available handwashing area. Where tissues are used, bin immediately, then wash hands. Cough directed to crook in elbow. Children and young people should wherever possible be encouraged to not bring toys from home or to share their personal belongings. However, if a child brings their own items from home only they use this to not increase the risk of indirect spread of virus. <i>Consideration should be given to children with complex needs.</i>			
Spread of infection through attending setting	All Persons within Setting	Spread of Virus through surface contact	LOW	MED	HIGH	SPECIFIC CONTROLS: HANDWASHING AND OTHER HYGIENE Provide supplies of tissues, soap, paper towels and hand sanitisers in all areas. Staff and children wash hands with soap and water for 20 seconds. Dry hands thoroughly with paper towels/kitchen rolls and dispose of in a foot pedal bin. Wash Hands: ☐ On arrival at setting. ☐ Before & after eating. ☐ After toileting. ☐ At regular intervals throughout the day. ☐ When moving between different areas e.g. between rooms or inside/outside. ☐ After blowing nose/sneezing. Anti-bacterial handwash is not recommended for children when soap and water is available. Anti-bacterial should not be used by children under 12mths. Settings should try to provide hand washing facilities outdoors.	L		

						Encourage children not to touch face – use distracting methods rather than asking them to stop. Staff hair should be tied back where appropriate and clothes changed daily. Children encouraged to also tie hair back. Use a tissue or elbow to catch coughs or sneezes. Person to dispose of tissue in foot pedal bin. Staff should supervise and support of children wash hands effectively. There should be daily reminders/demonstrations of how to do this. Staff and children should decide on handwashing schedule for each session. Never share communal bowl to wash hands. https://www.gov.scot/publications/coronavirus-covid-19-phase-3-guidance-on-reopening-early-learning-and-childcare-services/pages/infection-prevention-and-control/ https://creativestartlearning.co.uk/early-years-outdoors/hand-hygiene-outdoors/			
Spread of infection through attending setting	All Persons within Setting	Spread of Virus through surface contact	LOW	MED	HIGH	SPECIFIC CONTROLS: CLEANING General Cleaning If building has been closed for many weeks, appropriate and thorough cleaning must take place before opening. Open doors and windows to encourage natural ventilation. Increase cleaning frequency of frequently touched surfaces, two hourly and before and after meals and snacks. Cleaning materials to be made available throughout the session for staff. These will be provided by Janitorial /Cleaning Services. Staff to devise a cleaning schedule and identify procedures and cleaning products to be used. Cleaning schedule to be recorded. Cleaning materials to be stored for ease of use and to avoid cross contamination.	L		

					Follow manufactures instructions for dilution, application and contact times for surfaces. Toys and equipment that children access should be cleaned when groups of children change – e.g. between sessions (if groups are changing) and at the end of the day or in the morning before the session begins All cleaning should be done in line with Health Protection Scotland COVID-19 Information and Guidance for General (Non-Health) Care Settings) Document: Ensure environmental cleaning done regularly. Avoid creating splashes and spays when cleaning. Routine cleaning and disinfection of frequently touched objects and surfaces e.g. telephone, chairs keyboard, tablets, desks, tables, light switches, taps and door handles. Routine toilet cleaning, paying attention to touch surfaces- doors, flush handles, soap and paper product dispensers. Cutlery and crockery in shared kitchen areas should be cleaned with warm general-purpose detergent and dried with paper towels/kitchen roll before storage. Cleaning should be done with disposable clothes and disposable mop heads using household detergent/disinfection Avoid leaving food stuff exposed and open for communal sharing unless individually wrapped. When undertaking general cleaning, double glove, and change top pair of gloves often. <u>Enhanced Cleaning (Suspected COVID –19 Case)</u> Mops and clothes to be disposed of after use. These should double waste bags as outlined in Aberdeenshire PPE/Waste/Laundry Guidance.			
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					Disinfect within quarantine area, where person was placed/isolated, including all potentially contaminated high contact areas such as door handles, rails and bathroom. Any public area that the symptomatic individual has passed through e.g. corridor. Canteen etc. should be cleaned as per normal routine, if not visibly contaminated. Once a possible COVID-19 case has left the premises, the building management should immediately quarantine the work area and the area the individual has spent more than 15 minutes in. These areas should be cordoned off to a 2-metre radius. Building management should affix signage notifying of 72 hours exclusion. Building management needs to investigate where the individual has been and report to the cleaning services. Cleaning services will contact the cleaners within your setting to advise on what to do. If areas have been quarantined for 72 hours, enhanced cleaning applies. If you are unsure of any of the procedures necessary to carry out an enhanced clean or feel you don't have the necessary supplies STOP AND CONTACT YOUR LINE MANAGER. Or line manager who should contact the cleaning services. <u>Deep Cleaning - Spill Kits</u> If there is an actual physical, visible contamination such as a body fluid spill, then STOP AND CONTACT YOUR LINE MANAGER who should contact the cleaning services. Only suitably trained personnel should use Spill Kits to clean blood or body fluid spillages. If no Spill Kit is available, the SLT should cordon off the area place paper towels over the spill and spray with disinfectant product. SLT to notify janitorial/cleaning services.			
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					If furnishing is heavily contaminated, you may have to discard it. Contact: Arthur Pearson Ventilation Leave non-fire doors open to reduce the amount of contact with doors and also potentially improve workplace ventilation. Open windows to improve the flow of air where possible. Where centralised or local mechanical ventilation is present, systems should be adjusted to full fresh air. When changing filters enhanced precautions should be taken. Ensure systems do not automatically adjust ventilation levels due to differing occupancy levels. Janitorial Support Teams are able to support with the logging of any calls concerning window opening faults if detected. FES have been advised to prioritise any calls for windows that cannot open / are hard to open. Internal fire doors must be closed should an evacuation take place, when the space is not in use and a responsible adult must be present if propped open and the Fire Risk Assessment updated. These temporary procedures are only allowed as a result of the need to ensure ventilation in all spaces where people are present and revised documents must be shared with all relevant parties. Guidance and Links: https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2973/documents/1_covid-19-guidance-for-n-on-healthcare-settings.pdf https://www.hps.scot.nhs.uk/web-resources-container/infection-prevention-and-control-in-childcare-settings-day-care-and-childminding-settings/ https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/infection-prevention-and-control/#cleaning https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2448/documents/1_infection-prevention-control-childcare-2018-05.pdf  Guidance for School Staff on Personal Prot			
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Spread of infection through attending setting	Staff	spread of Virus through person to person contact Spread of Virus through surface contact	LOW	MED	HIGH	SPECIFIC CONTROLS: USE OF PPE For the majority of staff PPE will not normally be necessary. Use of PPE in settings should be based on a clear assessment of the risk and need for an individual child, ie personal care. It is the responsibility of the Head Teacher to ensure that they have sufficient stocks of PPE within their school (inc EYSP in the ELC Setting) at all times – the current guidance from procurement is always having 4 weeks stock on site. PPE to be worn when supporting children with personal care involving close contact e.g. during nappy changing, feeding, toileting and medical interventions. SLT to ensure all staff have access to the correct PPE and that staff are trained to use it correctly. Types of PPE required for specific circumstances: • ROUTINE ACTIVITIES – No PPE required • SUSPECTED COVID-19 – Gloves, apron and a fluid-resistant surgical mask when direct personal care needed. Eye protection if a risk assessment determines there is a risk of splashes to the eyes. Gloves and aprons worn when cleaning the areas where suspected case has been. • INTIMATE CARE – Gloves and apron. Risk of splashing mitigated with the wearing of fluid-resistant surgical mask and eye protection. Gloves and aprons worn when cleaning the area. PPE Equipment is: • Aprons -change after every use (single use) • Gloves - change after every use (single use) • Fluid Repellent Surgical Masks –change after every use (single use) • If there is risk of spitting, or facial exposure to bodily fluids - then eye protection will minimise risk. • First Aid trained staff to be informed of protocol and follow procedures • All First Aid Kits to contain PPE: gloves, aprons, and masks. • All toilet areas to contain signage highlighting good handwashing routines. • Where manual handling / personal care is required, at least two members of appropriately trained staff should be available. It should	L		
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						be established if this additional support is needed and wear PPE where providing direct personal care. Face Coverings: Face coverings should not be required for most children and staff unless clinically advised to do so. Where adults cannot keep 2m distance and are interacting face-to-face for a sustained period (more than 15 minutes) a face covering should be worn and will be provided. Adults in the setting in other circumstances should not need to wear face coverings as long as they can maintain 2m distancing. Should the prevalence of the virus in the population start rising schools may wish to encourage adults to wear face coverings as part of an enhanced system of approaches to reduce transmission. Impact of wearing face coverings on learners with additional support needs should be considered. Anyone (staff or pupil) who wishes to wear a face covering is free to do so. Guidance and Links: https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/infection-prevention-and-control/#ppe covid-19-decontamination-in-non-healthcare-settings guidance. https://aberdeenshire.sharepoint.com/sites/Arcadia/services/Pages/Business%20Services/HR%20and%20OD/Health%20and%20Safety.%20Wellbeing%20and%20Risk%20Management/Health-and-Safety-Wellbeing-and-Risk-Management.aspx.  PDF Guidance for School Staff on Personal Prot			
Spread of infection through	Staff	Spread of Virus through	LOW	MED	HIGH	SPECIFIC CONTROLS: OUTDOORS	L		

attending setting		person to person contact Spread of Virus through surface contact				Evidence suggests that outdoor environments can limit transmission, as well as more easily allowing for appropriate physical distancing between children. If outdoor equipment is being used, settings should ensure that multiple cohorts of children do not use it simultaneously, as well as considering appropriate cleaning between cohorts of children using it. Staff should consider how they can safely maximise the use of their outdoor space. Staff should plan for children to enjoy active energetic play across the day and this may include making use of other areas near to the service. Within any public spaces staff should be aware, always, of the need to physically distanced and to keep groups of children distanced from any other children or adults who may be in the vicinity. Staff should take the necessary precautions to protect children from the elements and this should include suitable clothing, head coverings and sunscreen. Advice on sun safety is available from the NHS. Parents should provide all weather appropriate clothing to avoid children sharing items. Staff and children should not share outdoor clothing. Ensure that every person has their own designated jackets/wellies etc. These should be washed regularly and stored appropriately. (All changes of clothes should be kept in setting and should not go back and forwards from home.) Guidance and Links: https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/outdoor-spaces/			
Spread of infection through attending setting	All attending setting	Spread of Virus through person to person contact	LOW	MED	HIGH	SPECIFIC CONTROLS: SETTLING IN AND PLAYING Children may need extra support and additional time to return to or start a setting. Settings where possible, should continue to use existing policies and procedures to settle children into settings.	L		

		Spread of Virus through surface contact			Where possible, settling in activities should happen outdoors with the parent and away from other children whilst adhering to current social distancing guidance. Ensure that plans for settling in are individualised to support the needs of families and children. Decrease the number of resources to minimise cross contamination between groups but ensure there are still high-quality play experiences for children. Use outdoors as much as possible. Create boxes or trays of toys and sensory play for each individual group. Try to avoid working with paper/other materials that are shared in a way that minimises cross contamination. Resources such as sand, water and playdough can be used with regular cleaning of the equipment used. Water and playdough should be replaced on a daily/sessional basis, when groups change. All shared resources to be cleaned after use (including computers, PE equipment etc) and at the end of session. Remove items of furniture and resources which are not needed to increase capacity and decrease the number of items which require cleaning. Staff to ensure children have adequate resources and furnishing to support quality experiences. A schedule for cleaning these will be in place in between sessions. If children are involved with cleaning equipment, adult to supervise and further clean if necessary. Hand sanitiser to be available throughout setting both indoors and out and used by adults before and after handling toys etc. Guidance and Links: https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/settling-in/			
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						https://abcdoes.com/abc-does-a-blog/2020/05/30/what-now/			
Spread of infection through attending setting	All attending setting	Spread of Virus through person to person contact Spread of Virus through surface contact	Low	Med	High	SPECIFIC CONTROLS: FOOD PREPARATION AND SNACK Staff should follow usual good hygiene practices when preparing or serving food or assisting children with packed lunches. There is no need for additional PPE at meal and snack times. Ensure all staff are aware of food allergies and intolerances and support children with these. ELC providers may wish to consider the following potential approaches to minimising interaction between groups at dining times and dealing with associated logistical issues: • increasing the space for dining or implementing staggered dining arrangements, with children eating in their arranged groups • If there is a risk of cross contamination children should stay in their play area or eat outdoors. • Limit the number of staff using staffrooms or bases to eat. Social distancing to apply. All areas and surfaces should be kept as clear and clean; all dishes should be washed, dried, and tidied away for good hygiene. Safe, hygienic, and labelled food storage is necessary for shared fridges by staff. Safe hygienic and labelled food storage is necessary for main fridge. If setting using Aberdeenshire Catering Services, risk assessments should be discussed and carried out between the setting and service. Payments should be taken by contactless methods wherever possible. Cash should be put in a sealed envelope and deposited in a collection box. Staff handling money should wear PPE and follow good hand hygiene. Children should not prepare, or self-serve snack, at this time. Communal bowls, dishes and jugs should not be used. Staff should always serve food and drinks to children. Staff should always make water available, but children must not self-serve.	L		

						All rubbish and waste should be put straight in the bin by children/ staff (own)and not left for someone else to clear up. All areas used for eating must be thoroughly cleaned at the end of each sitting and session, including chairs, door handles, vending machines etc. Guidance and Links: website/nss/2448/documents/1_infection-prevention-control-childcare-2018-05.pdf https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reopening-early-learning-and-childcare-services/pages/blended-placements-provision-of-meals-and-snacks/			
Risk of infection of children with additional support needs	Children & young people	Risk of not following existing procedures for pupils	LOW	MED	High	<u>SUPPORT FOR CHILDREN AND YOUNG PEOPLE WITH ADDITIONAL SUPPORT NEEDS</u> HT / EYSP to review existing documentation for individual pupil (Inc. behavioural/medical risk assessments, MAP, PEEP) with and update considering current guidance. Update the Fire Evacuation Procedure to reflect any changes and share information with all staff. Where manual handling / personal care is required, at least two members of appropriately trained staff should be available. It should be established if this additional support is needed and wear PPE where providing direct personal care. Only essential staff should enter the designated room where personal care is being carried out. Establish a cleaning routine for specialist equipment for children with additional support needs, sensory rooms, to ensure safe use. HT/EYSP to ensure Personal Plans are in place for all children within 28days of starting setting, EYSP to ensure theses are shared with Team & Parent Carers. Guidance and Links: https://aberdeenshire.sharepoint.com/sites/Arcadia/services/Pages/Business%20Services/HR%20and%20OD/Health%20and%20Safety.%20Wellbeing%20and%20Risk%20Management/Health-and-Safety-Wellbeing-and-Risk-Management.aspx	L		

Spread of infection. Infection of staff, children & visitors.	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff, children and visitors	L	M	H	OUTBREAK MANAGEMENT Management of outbreaks in schools is led by local Health Protection Teams (HPTs) alongside local partners following established procedures. Ensure you know how to contact local HPT: - Grampian Health Protection Office Hours Tel No. 01224 558520; Out of Hours Tel No. 0345 456 6000 (Ask for Public Health on Call) Email Address: grampian.healthprotection@nhs.net If schools have 2 or more confirmed cases of COVID-19 within 14 days they may have an outbreak. In this situation contact HPT and local authority. Increased of respiratory illness should prompt contacting HPT for advice. If outbreak confirmed schools should work with local HPT to manage with local authority. Actions may include: - Attendance at multi-agency incident management team meetings - Communications with pupils, parents/carers, and staff - Provide records of school layout / attendance / groups - Implementing enhanced infection, prevention and control measures. HPT will make recommendations on self-isolation, testing and the arrangements to do this. Any discussion of possible school closures should take place between school, local authority and local HPTs. Schools should maintain appropriate records. Early Years settings should inform their Care Inspectorate inspector about any adult or child COVID-19 outbreaks. https://www.careinspectorate.com/index.php/coronavirus-professionals	L	M	H
Spread of infection. Infection of staff, children & visitors.	Staff Children & young people Visitors	Cross contamination of infection. Infection of staff,	L	M	H	WHEN CONTRACTORS / VISITORS COME ONTO SITE <u>All visitors to complete a compulsory track and trace QR Code data sharing procedure or sheet before gaining access to site. This is separate to signing in sheet to follow GDPR guidance. This information is retained by the school office.</u> Please find guidance here for QR Code Set Up. Please find a copy of the Data Collection Sheet here & GDPR Template here . Guidance on Collection of Visitor Details here .	L		

		children and visitors				Set up social distancing at reception areas. Minimise person to person contact by putting procedures in place for deliveries and facility management work. ALL visitors into the building, including delivery drivers MUST provide track and trace information. Reception windows should remain closed where possible. There is a legal duty to provide welfare facilities and washing facilities for visiting drivers. Establish what facilities visitors would be directed to for this activity in your setting. Contractors arriving at site are directed by signs to <u>main entrance</u> where possible. To follow same hand sanitising and handwashing rules as per other visitors and staff. Only essential maintenance to take place during normal school hours and social distancing must be adhered to at all times. Social distancing should be adhered to. Staff/ volunteer / visitor distance of 2m where possible. Face covering to be worn by adults where distancing of 2m cannot be achieved.			
Spread of infection. Infection of staff, children & visitors.	Staff Visitors	Cross contamination of infection. Infection of staff, children and visitors	L	M	H	STAFF AREAS/BASES The same social distancing and hand washing hygiene applies to all staff. Consider breaks being staggered as per children's breaks to avoid congestion/contact. Staff should ensure that they use their own eating and drinking utensils. All areas and surfaces should be kept as clear and clean; <u>all dishes should be washed in warm soapy water, dried and tidied away for good hygiene by individuals.</u> Safe, hygienic and labelled food storage is necessary for shared fridges by staff. Universal signage should continue into any staff areas/bases and offices. Where there is a sink in the area, soap and paper towels should be available. Bin placed near sink.	L		

						Areas to be kept well-ventilated where possible. Reduce the range of resources to be used. Reduce the sharing of resources as much as possible. Trays of equipment for individual should be created. Consider the provision of hand sanitiser in each area.			
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Process/Activity: Infection Prevention & Control				Location: All ECS Establishments	Date: 01.06.2020
Establishment RA Author: Dawn Anderson DHT and Natalie Munro EYSP in consultation with all EYPS and AEYP				Date of Review: 10 th August 2020 7 th September 2020 29 th September 2020	

This is a generic Risk Assessment, as such establishments should tailor to suit the needs of their own premises and controls used. Existing Risk Assessments should be reviewed to highlight controls considering COVID -19 Guidance and how they aim to reduce risk as far as is reasonably practical.