

Beebops Ltd General Class Infectious Diseases and Pandemic Risk Assessment

Date of Review : Aug 2021

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**Key:**

1. Minor Injury = Abrasions, bruising, minor burns (reddening of the skin).
2. Significant Injury = Lacerations leading to blood loss, secondary burns (leading to blistering), sprains & strains, muscle & ligament injury, minor head injuries. of underlying conditions i.e. asthma, epilepsy, bronchitis, diabetes, hyper/hypothermia.Acute representations
3. Serious Injury = Fractures, trauma leading to significant blood loss, head injuries leading to periods of unconsciousness.
4. Major Injury = Multiple fractures, spinal or cervical injury, multiple trauma, injury affecting respiratory system, head injuries leading to significant periods of unconsciousness.
5. Major Incident/Fatality = Single or multiple fatality or large numbers of injuries in cat 3-4.

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|  | **Severity** |  | **Likelihood** |
| **1** | Minor Injury | **1** | Unlikely |
| **2** | Significant Injury | **2** | Possible |
| **3** | Serious Injury | **3** | Highly Possible |
| **4** | Major Injury | **4** | Probable |
| **5** | Major Incident/Fatality | **5** | Certainty |

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| --- | --- | --- | --- | --- | --- | --- |
| **Severity x Likelihood = Risk** | 1 | 2 |  | 3 | 4 | 5 |
| 1 | 1 | 2 |  | 3 | 4 | 5 |
| 2 | 2 | 4 |  | 6 | 8 | 10 |
| 3 | 3 | 6 |  | 9 | 12 | 15 |
| 4 | 4 | 8 |  | 12 | 16 | 20 |
| 5 | 5 | 10 |  | 15 | 20 | 25 |
|  |  |  |  |  |
|  | **Risk** |  |  |  |
|  | **Acceptabl** |  |  |
|  | **e with** |  |  |  |
|  | **Adequate** |  |  |
|  | **Control** |  | **Unacceptable** |
| **Acceptable Risk** | **Measures** | **Risk** |  |

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| --- | --- | --- | --- | --- | --- |
| **Hazard** | **Who is at Risk** | **Risk Rating**(no control measures) | Control Measures | **Risk Rating**(with control measures) | **Additional Controls** |
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| **S** | **L** | **R** | **S** | **L** | **R** |  |
| **Families will arrive at the venue at the same time increasing the risk of contracting and Infectious Disease*** A number of people arriving with children, increasing the risk of contracting an Infectious Disease
* No knowledge of family’s current health or Infectious disease status.
* Health and hygiene not maintained
* Non-essential travel and social interaction guidelines not followed by staff and families increasing risk of COVID
* Families not making us aware of child having had medication
 | Parents, children and staff | 5 | 2 | 10 | * Families to be aware of social distancing when arriving for the session, by following social distancing guidance and waiting in their vehicles (if walked, ensure 2 m gap in a queue) until class teacher comes out. Larger gaps between classes
* Only families who are symptom free or have completed the required isolation period attend the setting.
* On arrival at the session, it is reasonable to ask if parents, children or any member of the household have any of the symptoms of an Infectious disease (For Covid-19 these are high temperature or a persistent cough). If the answer is yes, they should not be allowed to enter the setting. The child cannot return until a negative test result has been confirmed and agreed return or current isolation guidelines followed.
* No toys, teddys or blankets (or similar) to be brought in from home. Bags and coats are requested to not be brought into the hall.
* Everyone entering the class is to wash hands thoroughly on arrival at the class and when leaving.
* Encourage everyone to avoid touching their face, eyes, nose and mouth.
* Only parents who are symptom free and or have completed the required isolation periods will be able to drop off or collect their child.
* 1 adult per child in class
* Sanitiser, paper towels, tissues available at entrance.
* Notices around the building advising good hygiene practice
* All cleaning and infection control protocols to be followed
* Rooms will be fogged and touch points cleaned before the class and after each session
 | 5 | 1 | 5 |  |
| **Contracting Infectious Diseases due doing several sessions in a day or week**Staff mixing with different parents and children leading to cross contamination. | Staff and childrenParents | 5 | 2 | 10 | * Children are organised into groups for age and ability and location.
* Class teachers will ensure at least 2m distance from every parent and child
* Ensuring rooms and all equipment is suitably cleaned between sessions.
 | 5 | 1 | 5 |  |
| **Risk of contracting an Infectious Disease due to play and learning arrangements.** * Social distancing not being maintained
* Parents gathering outside
* Children not understanding health and hygiene measures
* Children’s wellbeing not maintained.
 | Children, Parents and staff | 5 | **2** | 10 | * Implement social distancing where possible using induvial equipment for each child
* Parents encouraged to leave the site promptly after the session
* Minimise the resources available to those that can be cleaned effectively.
* Ensure children wash hands before and after the class, after coughing or sneezing.
* Be responsive to children’s wellbeing, and their ability to manage the change. Communicate processes effectively with parents to ensure they understand the changes in place.
* Staff awareness of children needing more reassurance
* Follow current guidance on changes to EYFS, relevant to Covid 19 response
* Expect social distancing from parents
 | 5 | 1 | 10 |  |
| **Someone displays symptoms of Infectious Dieases leading to possible further infections** | Staff, Parents and children | 5 | 2 | 10 | * Continuous cough or a high temperature, they should be sent home to isolate per the guidelines.
* Ask the parent and child to leave
* If they need to go to the bathroom while waiting to be collected, the bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
* If a member of staff has helped someone who displayed symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell.

If clinical advice is needed, the setting staff, parent or guardian should go online to NHS 111 (or call 111 if they don’t have internet access)REMEMBER CHILDREN DO NOT GET INFECTION OR SPREAD COVID THE SAME WAY AS ADULTS DO. | 5 | 1 | 5 |  |
| **Staff spreading Inefectious diease whist attending the class** | Staff, Parents and children | 5 | 3 | 15 | * Staff should only attend work if they are symptom free, have completed the required isolation period or achieved a negative test result.
* Risk assessing with regular health questionnaires for returning staff.

Practitioners should receive clear communication regarding the role they play in safe operating procedure and all measures being taken to ensure the safety of the children and themselves.* Staff to be vigilant on health and stay away if unwell.
* Current government guidance to be followed.
* If a staff member or child becomes infected by an infectious disease track and trace will be notified and the systems put in place
 | 5 | 2 | 10 |  |
| **Visitors to the class spreading an infectious diease** | Staff, parents and Children | 5 | 2 | 15 | * Attendance at the classes is limited to 1 parent per child only
 | 5 | 1 | 10 |  |
|  |  |  |  |  | * Classes must be prebooked, to ensure we do not have excess numbers in the class
 |  |  |  |  |
|  |  |  |  |  | * Payments will be ideally made online, or if that is not possible via card. No cash to be accepted.
* Adults are to wear masks when entering and exciting the building and when moving around to use shared facilities (unless medically exempt). During the sessions when the parents are socially distant on the mats these can be removed and placed in a plastic bag.
* Windows to be opened if possible to improve ventilation
* Doors to be propped open to reduce touch points – class teach to monitor to ensure children can not leave the room once inside. Door can be closed once session begins.
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**GUIDANCE FOR STAFF

Social distancing**

* Staff members should avoid physical contact with anyone and maintain at least 2 metres distance between them and anyone at the class
* Social distancing must be maintained by all customers

**Training**

* All staff members must receive appropriate instruction and training on infection control and the standard operation procedure and risk assessments within which they will be operate.

**Communication and Staff well being**

* Staff and Parents should receive clear communication regarding the role they play in safe operating procedure and all measures being taken to ensure the safety of their children and themselves. This signed and returned by parents and staff
* Management should ensure that staff have the opportunity to share their concerns, and that all changes are communicated to them.
* Management team to identify those who cannot return to work due to vulnerability
* - management team to have close contact (at a social distance) with all staff
* - staff who are feeling anxious/concerned need to raise issues with management team in timely manner and through appropriate channels
* - referral to Occupational Health as needed to help staff manage anxiety about returning to work
* - review processes with staff in each room on a weekly basis

**Use of PPE to reduce the risk of spread of infection**

* If a child requires first aid, the member of staff must wear a mask and gloves and an apron to perform this task.
* Staff are to wear a face visor at all times during the session

**Ensuring adequate cleaning to prevent the spread of COVID**

Onsite cleaning to maintain all cleaning standards and additional duties

* All equipment used by the children during the session must be cleaned and sanitised before it can be used again.
* Rooms are to be fogged between sessions
* Touch points are to be cleaned between sessions
* Waste from possible cases and cleaning of areas where possible cases have been, should be double bagged and put in a suitable and secure place, marked for storage until:
* If the individual tests negative; waste can then be put in with the normal waste
* the individual tests positive or results not known; then store it for at least 72 hours and put in with the normal waste
* All infection control protocols and guidance should be followed