	PARK ROYAL MONTESSORI NURSERY RISK ASSESSMENT Autumn 2020	
Task Activity	Covid-19 (Coronavirus) pandemic risk assessment	

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) affected period

Hazard	Who could be harmed?	Existing Controls What are we already doing to prevent harm?	Risk Rating	Additional Controls
How could harm be	Staff? Children? Parents?		High/Medium	Needed? If YES, transfer
caused?	Visitors? Public?		/Low	to Action Plan
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 at Park Royal Montessori and further drive down transmission of coronavirus (COVID-19). The setting 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	Low	

		high temperature of 37.8 degrees centigrade or	
		higher, or a loss of, or change in, their normal sense	
		of taste or smell (anosmia)), or have someone in	
		their household who is, they should not be in the	
		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	
		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,	As far as possible, parents and carers should not	
of children, parents, staff	Visitors, Public	enter the premises. Staff must be deployed to	
and visitors, which can		ensure families are supported with new	
enhance the spread of		arrangements as they arrive at and leave nursery.	
germs if appropriate		Staff must consider the 'door STEP' risk assessment	

protocol is not in place	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 and	
	will be dependent on numbers of children	
	attending and accessibility to the building. During	
	arrivals and departures, measures to be taken	
	should include adherence to social distancing	
	guidelines :	
	As we have only one entry / exit to the nursery to	
	avoid crowding as staff and families arrive / depart	
	discourage parents from gathering at the nursery	
	entrance and reception area.	
	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	

Wherever possible, the nursery is encouraged to

Visits and Visitors avoid visitors entering its premises. In instances attending the site which where the setting need to use other essential professionals such as social workers, speech and heightens the risk of germs spreading language therapists or counsellors, or professionals to support delivery of a child's EHC plan, the nursery 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. A Parent / Visitor / Contractor Health Declaration must be completed by any Parent / Visitor / Contractor entering the nursery premises. 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. 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. 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.

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 .

Please see Settling -in Policy Nursery Reopening on our website 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 do so safely. 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 were no longer required to keep children in small, consistent groups within settings. Settings should still consider how they can minimise mixing within settings, for example where they use different rooms for different age groups, keeping those groups apart as much as possible. The nursery should work through the system of controls set out below and within this risk	
		assessment. These are the set of actions our setting must take. They are outlined in more detail below. 1 Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID -19) symptoms, or who have someone in their household who does, do not attend the nursery. 2 Clean hands thoroughly more often than usual 3 Ensure good respiratory hygiene by maintaining	

and promoting the 'catch it, bin it, kill it' approach	
4 Introduce enhanced cleaning, including cleaning	
frequently touched surfaces often using standard	
products, such as antibacterial detergents	
5 Minimise contact between groups where	
possible	
6 Where necessary, wear appropriate personal	
protective equipment (PPE)	
7 Engage with NHS Track and Trace	
8 Manage confirmed cases of coronavirus (COVID -	
19) in the setting	
9 Contain any outbreak by following local health	
protection team advice. Numbers 1 to 4 must be in	
place in all settings, all the time. Number 5 must be	
properly considered and our setting 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.	
If children are unsettled or upset, practitioners	
should continue to be available to offer	
reassurance, comfort and support. The Key Person	
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	

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	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 who use the toilet	
	facilities at one time	
	Changing units/mats organised for each room	
	where needed	
	Toilets will need to be cleaned regularly and	
	children must be encouraged to clean their hands	
	thoroughly after using the toilet.	
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	Our nursery 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, water, playdough	
and sand play, 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	
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	
our 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 take prepared food from the kitchen and	
bring it back to their rooms.	
• All meals will be served within the rooms, or	
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.	

 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	
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, then placed in their personal boxes. • 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 The place in a side of the side of	
		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 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.	
By not having Effective	Staff, Children, Parents,	Promoting handwashing. Proper handwashing	
handwashing systems in	Visitors, Public	requires the following steps:	
place, will maximize the		1: Moisten hands under running water	
risk of contamination		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.	
		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. 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 importance of handwashing in key group times. 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. 'Bits of paper x2, lying on the ground, the words becomes. 'Wash your hands, wash your hands; up and down, up and down; and between your fingers, and between your fingers; on the back, on the back.' . 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	Staff, Children, Parents,	Respiratory hygiene (catch it, bin it, kill it) Children	
Respiratory hygiene	Visitors, Public	should be taught the importance of not touching	
information clear for all		their mouth, eyes and nose, where possible. Adults	
parties and appropriate		must avoid touching their mouth, eyes and nose.	
products available and in		Children and adults should cover their mouth and	
place to stop germs from		nose with disposable tissues when they cough or	
spreading (catch it, bin it,		sneeze. If a tissue is not available, they should	
kill it)		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 Bins must have lids and be emptied	

		frequently.	
By not cleaning surfaces	Staff, Children, Parents,	The use of soft toys and toys with intricate parts or	
with anti-bacterial	Visitors, Public	that are otherwise hard to clean should be avoided	
products that are touched		. Rugs may be used and cleaned at the end of each	
frequently, will increase		day with a steam cleaner / steam mop. Toys will	
the risk of contamination		need to be kept well organized. There should be	
		sufficient resources to allow for some that are in	
		use, being cleaned, and drying. There should be	
		sufficient time 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.	
		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,	
		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 such as Milton sterilizing	
		fluid. Waterproofs, wellies and personal	
		equipment: Children should not share personal	

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		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.	
By not having appropriate	Staff, Children, Parents	Clothing, Laundry and Personal Hygiene There is no	
Laundry facilities and		need for anything other than normal personal	
personal hygiene not		hygiene and washing of clothes following a day in	
being maintained. Will		an educational or childcare setting.	
increase the risk of higher		All staff should wear clean uniform for each shift	
contamination and germs		when caring for the children.	
spreading		• The requirement for staff is to change into their	
		uniform when they arrive at the Nursery each day if	
		travelling by public transportation.	
		Uniforms should be washed at the maximum	
		temperature that the fabric will tolerate.	
		Do not shake dirty laundry	
		Children	
		Children must wear clean clothing daily • Where	
		possible, children should avoid wearing shoes with	
		shoelaces. Provided with indoor footwear.	
		Jewellery	
		No wrist Jewellery is permitted	
		No rings are permitted except a wedding band	
By not having appropriate	Staff, Children, Parents	Personal protective equipment (PPE)	
Personal protective		The majority of staff in childcare settings will not	
equipment (PPE) available		require PPE beyond what they would normally	
for use to all parties could		need for their work, even if they are not always	
increase the risk of germs		able to maintain distance of 2 metres from others.	
spreading more quickly		PPE is only needed in a very small number of cases:	

- Receiving children dropped off and returned to parents/carers
- 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 the nursery and should be at home.

Gloves must be removed and disposed of after every use.

The 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

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		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		
If all parties are not being	Staff, Children Parents	Testing Access to testing is already available to all		
vigilant with signs and		essential workers. The testing site is located		
symptoms and are not		at Harlesden Town Garden, Challenge Close,		
getting Testing this will		Harlesden, NW10 4BF).		
increase the risk of		This includes anyone involved in Brent and the		
contamination/ germs		setting. Employers, can book tests through an		
spreading quicker		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, the setting 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 is the		
		government's national test and trace programme.		
		This has brought 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		

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By not having the correct	Staff, Children Parents	Supporting vulnerable children and those with		
measures in place to		additional needs All existing vulnerable children		
support and protect		must be encouraged to take up their nursery place		
children with additional		as soon as possible. Nursery manager / key person		
needs could put them at		must check on the welfare of any child who does		
higher risk of becoming		not attend on any day, as per the Recording and		
unwell and others around		Monitoring Attendance (Children) procedure.		
them		Nursery manager to identify and plan how best to		
		support high needs groups, including parents 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		
		managing broups of children within the setting. This		

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		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		Children or adults who become unwell or there is a	
become unwell or there is		confirmed case of coronavirus in a setting If anyone	
a confirmed case of		becomes unwell with a new continuous cough or	
coronavirus in a setting,		high temperature of 37.8 degrees centigrade or	
could spread the infection		higher, or a loss of, or change in their your normal	
if procedures are not		sense of taste or smell (anosmia) in a childcare	
followed		setting, they must be sent home and advised to	
		follow the Guidance for Households with Possible	
		Coronavirus Infection. Please note, the setting does	
		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	Staff, Children, Parents	Shielded and clinically vulnerable children and	
appropriate measures in		young people For the vast majority of children	
place for our shielded and		young people, coronavirus is a mild illness. Children	
clinically vulnerable		and young people (0 to 18 years of age) who have	
children and young		been classed as clinically extremely vulnerable due	

people, they can be more	to pre-existing medical conditions have been	
at risk of the infection and	advised to shield. We do not expect these children	
become unwell	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 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	
	(COVI D -19).	
	shielding advice for all adults and children paused	
	on August 1st, due to a continued decline in the	
	rates of community transmission of coronavirus	
	(COVID -19). This means that even the small	
	number of children who remained on the shielded	
	patient list can return to the setting, 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 nursery 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. Our setting should endeavour 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 at distance away from others	
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 unwe	Staff, Children, Parents	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 protecting people defined on medical grounds as extremely vulnerable guidance, it is advised they only attend an education or childcare setting if social distancing can be adhered to and, 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.	
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. Take appropriate actions to reduce risk if hygiene rules and social distancing is not possible e.g. face coverings, gloves, hand	
not possible e.g. face coverings, gloves, hand sanitiser.	

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-	
		covid19-countries-and-territories-exempt-from-	
		adviceagainst-all-but-essential-international-travel	
		Return from travel Those returning will need to	
		follow the rules for entering the UK which may	
		involve a period of 14 days quarantine. 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:	
		https://www.gov.uk/government/publications/coro	
		navirus-covid-19-how-to-self-isolate-when-	
		youtravel-to-the-uk/coronavirus-covid-19-how-to-	
		selfisolate-when-you-travel-to-the-ukThey may not	
		have to self-isolate when they arrive from some	
		countries and territories. Please refer to the travel	
		corridors list for England:	
		https://www.gov.uk/guidance/coronavirus-	
		covid19-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-borderrules/coronavirus-covid-19-travellers-exempt-fromuk-border-rules			
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