**01.01c Outbreak Plan**

Plan adopted on 2nd March 2022

If there is an outbreak of a harmful disease such as Covid-19 advice to be sought from and reporting made to:

**Government Health Protection team:**

[www.gov.uk/health-protection-team](http://www.gov.uk/health-protection-team)

Telephone 0344 2254 524

Out of hours advice 0344 2254 524

**Northamptonshire County Council Advisor:**

Our allocated advisor: [Laura.waller@westnorthants.govuk](mailto:Laura.waller@westnorthants.govuk)

General enquiries: ECC.NCC@westnorthants.gov.uk

**Ofsted:**

[enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk),

An outbreak may be a country, community or setting outbreak. A country or community outbreak will be advised by public health and/or the government. A setting outbreak is two cases of the harmful disease in adults or children at the setting.

The following hazards to be considered and actions implemented:

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| --- | --- | --- | --- | --- |
| Hazard | People who may be harmed | Harm | Risk:  High/Medium/Low | ACTIONS TO MINMISE RISK |
| Drop off/ pick up – new routine, ability to maintain social distance, | Children Parents  Staff | Transmission of Disease  Well-being | M | Parents are able to line up along path. Parent waits at gate and staff member receives child at door. In the event of a child not wanting to separate from parent, staff member can approach and carry chid indoors with mutual consent and at their own risk. Child’s temperature is taken on arrival before parent leaves.  Parents are not allowed to enter the setting. Children should wash hands immediately on arrival and so arrival times should be staggered to allow the extra time to do this. |
| If children are unable to change shoes/ deal with their coats or clothing, staff have to spend time in close contact. | Children Staff | Transmission of Disease  Well-being | L | Children to wear shoes that are comfortable and suitable to wear all day so no need to change. Parents should give thought to coats/ jumpers/buttons on trousers etc and send children in with clothes which require minimal assistance. No toys from home. Clean clothes to be worn each day. Staff to consider the option of changing at the setting to avoid cross contamination. |
| Staff room is a small space | Staff | Transmission of Disease | L | Use of the staff to be staggered due to size. |
| Phone/iPads - sharing resources, resources moving from home to setting and vice versa | Children Staff | Transmission of Disease | L | Staff should only handle their own iPads and the setting phone should be cleaned after each use. Clean iPads regularly. Do not allow children to handle iPads. Use of computer/printer limited to one person. Adults to minimise personal belongings coming into setting. |
| Without regular cleaning disease is known to remain on hard surfaces and soft furnishings. | Children Staff | Transmission of Disease | M | Regular cleaning required through the day of hard objects that are touched.  Staff to be made aware of additional cleaning responsibilities and briefed on infection control and additional risk assessments   * Daily checklist of cleaning created and is used to ensure that all frequently used objects and items are cleaned to include:   Door handles  Table tops/chairs  Toys/equipment/resources  Light switches  Toilets  Sinks  Door bell  Fridge  Kettle   * Staff to use disposable cloths and warm soapy water and/or antibacterial spray * Staff to wear disposable or washing-up gloves and aprons for cleaning * In areas where a break out of disease is suspected all cleaning materials will be double-bagged, then stored securely for 72 hours and thrown away in the regular rubbish after cleaning is finished * If an area has been heavily contaminated, such as with visible bodily fluids, from a person with symptoms additional PPE must be worn - use protection for the eyes, mouth and nose, as well as wearing gloves and an apron * Where possible soft furnishings have been removed from the environment where they are not washable, wipeable or disposable |
| Toys/equipment - Without regular cleaning the disease may remain on hard surfaces and soft furnishings. | Children Staff | Transmission of Disease | M | Only hard toys which can be washed to be provided, and they should be washed between groups. Wipe down climbing frame and slide after use. Where appropriate, items can be quarantined for 72 hours (if not washable) |
| Extended periods outdoors - Risk of sunburn in hot weather | Children Staff | Sunburn / Heat stroke | L | Parents asked to apply long lasting sun cream to child before attending setting, and to send children with a sun hat. Staff to take precautions – use sun cream, wear sunhat and use shaded areas. |
| Spread of disease through touching face and sneezing or coughing | Children Staff | Transmission of Disease | H | Children and staff to wash hands with soap and water for 20 seconds on regular basis throughout the day, also immediately on entry to the setting, before eating, after using the toilet and after using a tissue to wipe nose. Bins to be emptied on a regular basis. Encourage children to cough into elbow. |
| Lunch table - Children sitting and eating for a period of time together is a high risk point. Items being brought in from home and children needing assistance | Children Staff | Transmission of Disease | M | Dining tables to be separated and children spread out as much as possible. Sitting side by side is preferable to face to face. |
| Passing the disease through preparing snack | Children Staff | Transmission of Disease | L | Staff preparing snack to wear facemask, gloves and apron. |
| Risk of infection from close contact helping child with personal care/nappies | Children Staff | Transmission of Disease | H | Toilets to be cleaned regularly. If more than one group attending consider allocating a toilet for each group. Gloves/apron/face protection to be worn by staff member assisting personal care. Thorough handwashing. |
| Risk of infection from bodily fluids/taps in staff toilets | Staff | Transmission of Disease | L | Toilet to be cleaned regularly. Thorough handwashing. |
| Risk of transmission with lots of young children in a small area | Children  Staff | Transmission of Disease | M | Ventilation – natural ventilation should be provided through open windows or doors, but fire doors should not be propped open. Partially opening windows can provide adequate ventilation in windy weather. Air rooms as frequently as possible, this can be done when the room is unoccupied. Extra clothing may be required to be worn. Fan convector heaters should not be used in poorly ventilated areas. Handwashing to be supervised throughout the day. Snack and lunches to be organised so children are well spaced out, snack on a rolling basis two children at a time if necessary. |
| Child arriving unwell - Potential risk child has the disease. | Children  Staff | Transmission of Disease | L | Recommended that child does not enter setting if they arrive unwell. |
| Child becoming unwell at setting with symptoms associated with disease – risk of transmission | Children  Staff | Transmission of Disease | M | If a child’s symptoms of the disease develop at setting they should be isolated in a separate room if possible, a member of staff allocated to care for them should wear PPE including a fluid resistant surgical mask. Windows should be opened for ventilation. They should return home as soon as possible and guidelines followed. After they leave, the area should be cleaned with normal disinfectant. If their condition deteriorates while at the setting 999 should be called. Families within that group notified that we have a suspected case. Notify all parents and staff. |
| Staff member becoming unwell at setting with symptoms associated with coronavirus | Children  Staff | Transmission of Disease | M | As above if they develop symptoms but member of staff who is unwell can also wear mask to protect others and should return home immediately if safe to do so and follow guidelines. Other staff called in to cover session. |
| Administering first aid, close contact is necessary, increasing any risk of transmission. Bodily fluids particularly saliva or vomit increase the risk. | Children  Staff | Transmission of Disease | H | Discussion should be had between staff regarding what PPE is appropriate for first aid treatment, depending on the nature of the injury/illness. When treating illness or injury where bodily fluids are present staff should be protected with PPE. |
| Face masks are shown to provide a level of protection for the wearer and others nearby. Not recommended to be worn by young children due to breathing issues/correct usage unlikely.  If children are not told in advance that staff may wear masks they may become upset when they see them. | Children  Staff | Transmission of Disease | L | Face coverings should be worn by staff and adult visitors where social distancing between adults is not possible. Face visors or shields should not be routinely worn as an alternative to face coverings. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned thoroughly.  Children do not need to wear a face covering. |
| Visitors eg maintenance risk disease being brought into setting | Children  Staff | Transmission of Disease | L | Visitors such as cleaners/workmen and so on should come out of opening hours. PPE should be discussed in advance, also special instructions eg double bagging bin bags with tissues. Advisable that volunteers do no attend setting for this period. |