**Our COVIDSafe Plan/Risk assessment**

Business name: Highvale Preschool

Site location: 56-58 Campbell Street Glen Waverley

Contact person: Karen Chadwick

Contact person phone: 0408211065nnnnnn

Date prepared: 2022

Please Note:

1. Whenever it states ‘sterilise’ it also means that the item/s in question have also been cleaned with soap and water first and then sterilised as this is the most effective way to clean.
2. ‘Impractical’ is written next to risks that will be hard to mitigate.

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| **IDENTIFY RISKS** | **ANALYSE RISKS** | **EVALUATE RISK CONTROLS** |
| **(People, physical assists, finances, etc.)** | **Likelihood** | **Consequence** | **What will be done to manage the risk** |
| Washing Hands | Moderate to High | Major- Not doing this properly can see the virus potentially spreading | 1. Everyone (staff and children) washes their hands thoroughly when arriving with hand wash
2. Extra hand washing will need to be done when hands get soiled e.g., when a child touches their face, mouth, nose or ears, etc.
3. Children/staff will be taught how to do appropriate hand washing.
4. Hand washing will be done OFTEN throughout the session using soap and water and using paper towel or using hand sanitiser
5. Paper towel placed in rubbish bin after use.
6. Hand sanitiser stations both inside and outside the kinder room for immediate clean hands
7. Hand washing signs in bathrooms and kitchen
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| Cleaning | Moderate to High | Major- Not doing this properly can see the virus potentially spreading | 1. GENERAL CLEAN OF SURFACES BY STAFF AS PART OF THE ROUTINE/TIMETABLE.
2. CLEANER TO DO A THOROUGH CLEAN EACH NIGHT.
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| Children’s hats | Moderate risk of contamination due to children removing hats when playing or returning to wrong hat pocket | Low- Cross contamination | 1. Sunhats in hat stand for each group.
2. Staff to supervise collecting hats.
3. Collection of hats outside.
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| Toys (blocks, puzzles, cars, dolls, etc.) | High risk of contamination due to the popularity of playing with toys and how children play with them i.e., close to (and often in) their mouth, next to their face, etc.  | Major- Cross contamination | 1. Appropriate toys for easy washing or wiped down.
2. Toys and equipment washed and removed if children put them in their mouth and sneeze/cough on.
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| External Visitors | Low to moderate (unless the person is infected and then it is high) | Major- That a visitor could potentially spread the virus | 1. No parents to enter the kinder building unless necessary.
2. Preschool Field Officer/s, Specialists and additional support for children may visit the centre.
3. Outside incursions only
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| Deliveries to the kinder | Low to moderate | Major- Cross contamination  | 1. Contactless delivery
2. Display signage for delivery drivers
3. Identify designated drop off areas.
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| Sign-in book | Low to moderate | Major- Cross contamination | 1. Parents sanitise hands before signing in.
2. Parents sign own child in.
3. Parents use appropriate pen and place in used pens box.
4. Used Pens sanitised and placed back in new pens containers.
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| Gate | Moderate to High (as the virus remains on metal for up to 7 - 9 days) | Major- Cross contamination | 1. Both gates will be open 15 minutes before the session starts and 15 minutes before the session ends so no contact is made with the gates.
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| Remote controls  | Low (as it is only staff that use these) | Major- Cross contamination | 1. Wash or sanitise hands prior and after using
2. Wipe down after uses.
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| Room phone | Moderate (as it is near one’s face and mouth and is shared by staff) | Cross contamination | 1. Phone for each educator – each labelled.
2. Wash or sanitise hands prior and after using
3. Sterilise phone after each use
4. Try and use speaker phone whenever possible to avoid phone being near one’s face.
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| Parent Library | Moderate (due to the popularity and high use it has) | Major- Cross contamination | 1. Remove books temporarily
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| Pick-up and Drop off – potential crowds outside the room | Moderate to high (due to the number of caregivers, including grandparents, and children gathered in the one area) | Major- Infecting one another if anyone potentially has the virus | 1. Only one adult to accompany their child
2. No siblings to enter the kinder grounds
3. Do not allow caregivers to enter the room at drop-off or pick-up.
4. Use markers for parents to stand on for social

distancing.1. Flow of traffic – parent and child to follow exit path and arrows after drop off and pick up times.
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| Filling up Children’s Drink Bottles | High (due to the nature that there may be spittle on the outside of the bottle) | Major- High risk of cross contamination | 1. Children fill their own drink bottles
2. Staff wear gloves if children need assistance.
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| Storage of drink bottles and lunch boxes | High (due to the nature that spittle may be on the outside of these devices) | Major- Cross contamination | 1. Children keep their lunch/snack containers in their bags.
2. Drink bottles placed on shelf above child’s locker for any access.
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| Children’s bags | Moderate (due to the popularity and high use it has) | Major- Cross contamination | 1. Children will have allocated a locker for their bag in the bathroom.
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| Eating  | High (due to children who may talk with food in their mouth, spill or spread items from their lunch boxes, sit too close to their friends, etc.) | Major- High risk of cross contamination | 1. Ensure children wash their hands thoroughly before and after eating
2. Sterilise areas where children will eat prior to and after eating
3. Eat outside as much as possible.
4. Staff to eat their food 1.5m from each other,

not in front of each other and sterilise their area prior and after eating1. No sharing of food by children or staff
2. Birthday cakes/cupcakes - Only pre-packaged items to be shared.
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| Toilets | High (due to bodily fluids) | Major- High risk of cross contamination | 1. Sterilise often throughout the day using disposable gloves
2. Remind children of hygiene when using the toilet., i.e., to wash hands thoroughly
3. Staff to wipe up any accidents/mishaps as soon as they notice it and use disposable gloves.
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| Office/Kitchen | Moderate to high | Major- Cross contamination | 1. Only one staff member in the office or kitchen at a time.
2. Always wear a mask.
3. Have Enrolment folders in the group cupboard for easy access.
4. Signs to show social distancing in these areas.
5. Avoid sharing equipment/computers/phones/kitchen supplies
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| Staff meetings | Moderate to high | Major- Cross contamination | 1. Social distancing at all times – 1.5m apart
2. Masks are worn
3. Not to sit opposite each other
4. Sit outside whenever possible.
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| Soap Dispenser | Moderate to high | Major- Cross contamination | 1. Staff to sterilise often throughout the day and especially at high use times such as prior to lunch, before and after playing, etc.
2. Staff to dispense soap whenever possible especially during high use times (see above)
3. Staff to wash their own hands prior to and

after using soap dispenser.  |
| Photocopier | Low | Major |  1. Wipe down after each use with sterilising wipes  |
| Staff - stationery | Low | Major | 1. Wash their hands prior or after if using shared stationery.
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| Compost bin | High | Major- Cross contamination | 1. Compost bins are used, emptied, and wiped down after use, each day.
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| Social Distancing | High (due to the age of the children and that they need us to be at their eye level and often close to their face so we can hear them/proper communication to occur. Often spittle will come out of the mouth of children when they speak and usually lands on our face/mouth due to our proximity that is needed) | Major- Sharing the virus through less social distancing  | 1. Staff to keep 1.5m whenever possible
2. Group times – children will be separated at the tables for group/sharing/eating times and outside as much as possible.
3. Place mats on the floor for Yoga
4. Social distancing signage in the room and sign in area
5. Minimise staff attending the kinder each day – administration hours completed at home. Only contact hours completed at the kinder.
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| Staff/visitors/delivery drivers sign-in book | Low | Major – cross contamination on pen | 1. All Staff/visitors to use hand sanitiser before signing in and out
2. Record all staff and visitors who enter the building.
3. Always maintain attendance of all who enter the kinder and keep records of each day.
4. No visitors to enter the building.
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| Staff eating | Moderate | Major – cross contamination | 1. Staff wash their hands prior to and after eating
2. Staff clean and sterilise area where they were eating.
3. Social distancing – 1.5m at eating times.
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| Sick children and staff | High | Major – not following this can have ill staff/children attend.  | 1. No ill children or staff will be allowed at the centre
2. Anyone who appears or starts to get sick during the day will need to go home.
3. To maintain staff ratios – if a staff member is sick, the centre will not replace the staff member and the kinder may close till the staff member is well.
4. Communication about the closure will be

provided to families via email. It is important that any child (or staff member) who becomes unwell with COVID-19 symptoms while at service returns home and gets tested unless those symptoms are known to be caused by an underlying health condition or medication.* The symptoms to watch out for are: fever
* chills or sweats
* cough
* sore throat
* shortness of breath
* runny nose
* loss or change in sense of smell or taste

Some people may also experience headache, muscle soreness, stuffy nose, nausea, vomiting and diarrhoea. Staff or children experiencing COVID-19 symptoms should be advised to follow the requirements set out in the Testing Requirements for Contacts and Exposed Persons and, where applicable, follow the COVID-19 rapid antigen test procedure. See [Managing illness in schools and early childhood services during the COVID-19 pandemic.](https://www.education.vic.gov.au/Documents/about/department/covid-19/managing-unwell-students-covid19-factsheet.pdf) |
| Enough disinfectant/cleaning equipment | High | Major  | 1. Check appropriate supply is available at all times.
2. Reorder supplies as needed
3. Always check hand sanitiser, soap, paper towelling, disinfectant and detergent
4. Stocktake supplies when necessary.
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| Cleaning children’s faces | Moderate to High | Major  | 1. **Staff member to wash hands after cleaning a child’s face or wear disposable gloves**
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| Applying first aid | High | Major – potential to spread | 1. **As the 1.5m rule won’t be able to be adhered to, staff will need to wear a mask as well as disposable gloves and remove and replace their apron after.**
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| Rapid antigen tests | High | Major – potential to spread | Free, voluntary rapid antigen testing for service staffConsistent with National Cabinet discussions, there will be voluntary rapid antigen testing in place for at least the first 4 weeks of Term 1 2022; the Victorian Government will deliver more than 1 million rapid antigen tests over 4 weeks to early childhood education and care services. The Victorian Government will supply and deliver rapid antigen tests to all services to support their staff – including Commonwealth funded childcare services – to support the whole sector. The twice-a-week testing will be voluntary but strongly recommended for early childhood education and care staff in sessional kindergarten, long day care, family day care, occasional care and outside school hours care. This includes teachers and educators but should also include other staff employed by the service, who are working at the service.  |
| **Covid-19 cases – child or staff test positive** | **High** | **Extreme – this has potential to spread through whole centre.**  | Isolate at home or in private accommodation for 7 days (inclusive of weekends) and **do not attend ECEC** during this period.Inform the ECEC that they have tested positive to COVID-19A negative test is not required to return to ECEC following completion of 7 days of isolation.Follow the [Checklist for COVID cases](https://www.coronavirus.vic.gov.au/checklist-cases) |
| **COVID-19 cases - Child or staff is a household contact**  | **High** | **Extreme – this has potential to spread through whole centre.** | **Close Contact** – **Staff** – Notify the service that they are a household or household-like contact.Follow the [Checklist for COVID contacts](https://www.coronavirus.vic.gov.au/checklist-contacts)**Staff members** must quarantine for 7 days (inclusive of weekends) and **must not attend ECEC** during this period unless a **critical work exemption** has been agreed (see *Critical worker exemptions*) If another person in your household tests positive during your 7-day quarantine period as a household contact (in addition to the initial case) your 7 day period doesn’t start again. You can complete the rest of that 7 day quarantine period, and you are cleared from quarantine if you have a negative result from a test taken on Day 6.However, if you test positive on Day 6 (or on any day of your 7 day quarantine period) your quarantine period will start again, because you are now infectious with the virus. You must isolate for another 7 days following your positive result.A close contact (household and household like) is required to isolate for 7 days because people you have spent more than four hours inside a house, care facility or accommodation with a positive person. Education contacts are not close contacts (household and household like). Under the conditions of the exemption, ECEC staff who are asymptomatic close contacts (household and household like) may return to work during the home isolation period, if it is necessary for continuity of operations of the service and if other options have been exhausted, subject to strict infection prevention and control requirements being met. ***Critical worker exemptions - this will only be put in place if all options of relief have been exhausted.***To be eligible to attend ECEC in these circumstances, staff must first notify their employer of their status as a close contact. Critically, both the staff member and their employer must agree to the staff member returning to the workplace. This is a voluntary, opt-in arrangement between the provider as employer and the ECEC staff member. Mutual agreement between the provider and ECEC staff member is required. Providers cannot direct a staff member to attend work using this exemption if the staff member does not wish to.Under these settings, ECEC staff who are close contacts will also need to take the following steps when attending ECEC during their isolation period:* undertake a daily rapid antigen test for 5 days and return a negative result prior to attending work each day.
* always wear a mask, including while teaching and in the company of others, except for when eating or drinking. Using a P2/N95 mask, or TGA-approved P2-equivalent mask, is strongly recommended.
* not enter shared break areas including staff rooms.
* when travelling to and from work the staff member must not carpool and should, where possible, avoid public transport.
* work in areas where transmission risk is lower (outside where possible and safe, or in large, well-ventilated spaces).
* other than when attending their ECEC worksite, staff must quarantine in accordance with public health requirements.
* notify their employer if, at any time, they develop symptoms or test positive on a rapid antigen test.

**Child –** Notify the service that they are a household or household-like contact.Follow the [Checklist for COVID contacts](https://www.coronavirus.vic.gov.au/checklist-contacts)The child must quarantine for 7 days (inclusive of weekends) and **must not attend ECEC** during this period. |
| **COVID-19 cases – other close contacts** | **High** | **Major** | If **asymptomatic,** children and staff should continue to attend ECEC and monitor for symptoms. Parents/carer can attend State testing centres and receive a PCR or rapid antigen test. If **symptomatic,** all children/staff must stay/return home Parents/carer can attend State testing centres and receive a PCR or rapid antigen test. Follow the [Checklist for COVID contacts](https://www.coronavirus.vic.gov.au/checklist-contacts) |
| Flu Shots and Covid vaccinations | High | Major  | 1. **All staff and children are highly recommended to have a flu shot.**
2. **All staff to have the Covid vaccinations including the booster.**
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| Personal hygiene with coughing, sneezing, blowing nose, etc.  | High | Major – it spreads through these sources.  | 1. **Teach children appropriate hygiene**
2. **Monitor/observe children when they do cough, sneeze, and blow their nose, etc. so that they do it correctly and appropriate hygiene is used after (refer to washing hands, etc.)**
3. **Always use the nose blowing station.**
4. **Posters are displayed in prominent areas as reminders**
5. **Tissues are readily available**
6. **Staff all educated on hand and cough hygiene, washing hands and sanitise their hands correctly.**
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| Relief staff | High | Major – stops cross contamination | 1. Staff to work their contact hours. Administration hours can be worked at home to minimise the number of staff at the kinder – assess as need be.
2. All staff only working at our Preschool. If a staff member is unable to attend their shift another staff member will cover that shift. If Highvale staff cannot relieve for another staff member, we will contact Relay.
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| Staff attending the kinder | High | Major – stops cross contamination | 1. Staff to wear a mask inside including meeting with staff and parents, collecting deliveries, and attending to visitors.
2. Social distancing at all times
3. Check in with QR code
4. Hand sanitise.
5. Understand and follow all the hygiene and safety procedures.
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| Vulnerable worker – * Aboriginal and Torres Strait islander 50 and over
* 65 or over with chronic medical condition
* Over 70-year old’s
* People with compromised immune system
 | High | Major | 1. **Identify vulnerable workers**
2. **Support staff member to conduct work duties at home.**
3. **Adapt working arrangements to enable working from home.**
4. **Support the health and wellbeing of vulnerable workers.**
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| Plan prepared by | Karen Chadwick.  |
| Prepared in consultation with: | Regulatory authorities, government bodies, health authorities and unions.  |
| Communicated to: | Staff  |
| **Reminder: Monitor the effectiveness of controls and change if necessary. Review the risk assessment if an incident or significant change occurs.** |

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| Risk Matrix |
|  | **Consequence** |
| **Likelihood** |

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| --- | --- | --- | --- | --- | --- |
|  | Insignificant | Minor | Moderate | Major | Catastrophic |
| Almost certain | Moderate | High | High | Extreme | Extreme |
| Likely | Moderate | Moderate | High | Extreme | Extreme |
| Possible | Low | Moderate | High | High | Extreme |
| Unlikely | Low | Low | Moderate | High | High |
| Rare | Low | Low | Low | Moderate | High |

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**Important Information Links –**

  <https://www.education.vic.gov.au/Documents/about/department/covid-19/ecec/ecec-covidsafe-settings-guidance.docx>

You can also refer to the following guidance:

* [WorkSafe: Managing COVID-19 risks – face coverings in workplaces](https://www.worksafe.vic.gov.au/managing-coronavirus-covid-19-risks-face-coverings-workplaces)
* [DHHS: [Preventing infection in the workplace](https://www.dhhs.vic.gov.au/preventing-infection-workplace-covid-19)](https://www.dhhs.vic.gov.au/preventing-infection-workplace-covid-19)
* DHHS: [Preparing for a case of coronavirus (COVID-19) in your workplace](https://www.dhhs.vic.gov.au/sites/default/files/documents/202007/preparing-for-a-case-of-covid-19-in%20your-workplace-guidance-covid-19.docx)
* DHHS: [Planning and responding to cases of coronavirus (COVID-19)](https://www.dhhs.vic.gov.au/planning-and-responding-coronavirus-covid-19)
* DHHS: [Cleaning and disinfecting to reduce COVID-19 transmission](https://www.dhhs.vic.gov.au/cleaning-and-disinfecting-reduce-covid-19-transmission)
* WorkSafe: [Other relevant industry specific guidance](https://www.worksafe.vic.gov.au/coronavirus-covid-19)

**Phone Numbers to contact –**  **DHHS – 1300 651 160 Coronavirus Hotline – 1800 338 663**

 **Regional Office – 1300 651 940 Worksafe - 132360**