

COVID-19 RISK MITIGATION POLICY AND PROCEDURE

Mandatory – Quality Area 2

Fordham Avenue Kindergarten Association Inc.



PURPOSE	This policy provides clear guidelines and procedures to follow when: <ul style="list-style-type: none">• a child or staff attending Fordham Avenue Kindergarten (FAK) shows symptoms of COVID-19• a child, staff or close contact of a child or staff at FAK is awaiting test results in relation to COVID-19• a child, staff or close contact of a child or staff at FAK has been diagnosed with COVID-19• managing and minimising the spread of COVID-19
REQUIREMENT	Mandatory – Quality Area 2
AUTHORISATION	This policy was adopted by the FAK Committee of Management at the Committee meeting on 1 September 2020 .
REVIEW DATE	This policy shall be reviewed on an ongoing basis in conjunction with up-to-date guidance from the Department of Health and Human Services (DHHS), advice of the Australian Health Protection Principal Committee (AHPPC), the Department of Education (DET) and the Victorian Chief Health Officer

POLICY STATEMENT

1. VALUES

FAK is committed to:

- providing a safe and healthy environment for all children, staff and any other persons attending the service
- responding to the needs of the child or adult who presents with symptoms of COVID-19 while attending the service
- complying with current exclusion schedules and guidelines set by DHHS
- complying with the advice of AHPPC, Victorian Chief Health Officer and DHHS
- providing up-to-date information and resources for families and staff regarding protection of all children and staff from COVID-19 and management of any cases of COVID-19 to minimise infection risk to others.

2. SCOPE

This policy applies to the Approved Provider, Person with Management or Control, Nominated Supervisor, Person in day-to-day Charge staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of FAK, including during offsite excursions and activities.

3. BACKGROUND AND LEGISLATION

Background

During the COVID-19 epidemic instruction and guidance have been issued by the DHHS and AHPPC.

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An approved service must take reasonable steps to prevent the spread of infectious diseases, including COVID-19, at the service, and ensure that the parent/guardian, authorised nominee or emergency contact of each child enrolled at the service is notified of the occurrence of an infectious disease, including COVID-19, as soon as possible. This policy sets out the procedures for dealing with COVID-19.

4. DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of Policy Works. For specific definitions relevant to contagious diseases, please see FAK's 'Dealing with Infectious Diseases' policy which should be read in conjunction with this policy and procedure document.

close contact: someone who has been face-to-face for longer than 15 minutes or shared a closed space for more than two hours with a person who has tested positive to COVID-19 when that person was infectious. In general, for an early childhood service:

- a) all children and any other staff/visitors who are with a case for 30 minutes or more are usually assessed as close contacts; and
- b) any staff who share an office with a case or who attended meetings for longer than that duration would be assessed as close contacts.

Closure: any decision to cease face-to-face learning at FAK will be made by the Executive Committee (EC) (in their capacity as the Person with Management or Control) on the advice of DHHS, DET or where the view is formed that there is an unacceptable risk to the staff or children.

COVID-19: severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) causes COVID-19 (corona virus disease). Although SARS-CoV-2 is the contagion and COVID-19 the resulting disease, the two terms are used interchangeably in this policy.

Isolation: separates people with COVID-19 from people who do not to prevent spread of infection. People must isolate at home or at another suitable location if they have tested positive for COVID-19 or have symptoms of COVID-19 and are awaiting a test result.

quarantine: separates and restricts the movement of people who have been or may have been exposed to COVID-19. People who are living with a person diagnosed with COVID-19 or are a close contact of a confirmed case of COVID-19 must quarantine at home.

symptoms: any signs of fever, respiratory systems (including but not limited to cough, sore throat, shortness of breath, body aches or fatigue).

test result: the outcome, as notified by a pathology laboratory or medical practitioner, whether COVID-19 is detected.

5. SOURCES AND RELATED POLICIES

Sources

- Australian Health Protection Principal Committee. *Statements Section for statements on health emergencies*. Available at: <https://www.health.gov.au/committees-and-groups/australian-health-protection-principal-committee-ahppc>

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- Fordham Ave Kindergarten. *Dealing with Infectious Diseases Policy*. Available at: <https://www.fordhamavekinder.org.au/policies-forms>
 - Early Learning Association of Australia. COVID-19 Planning Checklist (published online 24/7/2020). Available at: <https://elaa.org.au/wp-content/uploads/2020/07/RETURN-TO-PLANNING-CHECKLIST-DRAFT-FINAL.pdf>
 - Department of Health and Human Services. *Quarantine and Isolation*. (Published online 27/7/20). Available at: <https://www.dhhs.vic.gov.au/self-quarantine-coronavirus-covid-19>

PROCEDURES

The Approved Provider and Person with Management or Control are responsible for:

- putting in place risk mitigation protocols to manage the spread of COVID-19 (Attachment 6)
- ensuring communication is provided in relation to teachers and children not attending multiple places of care (i.e. childcare and FAK) to minimise the risk of cross site infection
- closing the service or ceasing face-to-face learning in response to a confirmed COVID-19 case at FAK (Attachment 1)
- if directed by the Approved Provider, ensuring communication is provided in relation to teachers and children not attending multiple places of care (i.e. childcare and FAK) to minimise the risk of cross site infection
- communicating obligations and delegated responsibilities to staff and parents/guardians to manage the spread of COVID-19 (Attachments 2, 3, 4, 6)
- ensuring that where there is an occurrence of COVID-19 at the service (Attachment 1):
 - reasonable steps are taken to prevent the spread (Regulation 88(1))
 - a parent/guardian or authorised emergency contact of each child at the service is notified of the occurrence as soon as is practicable (Regulation 88(2));
 - contact notification is made within 24 hours to DHHS and DET's Quality Assessment and Regulation Division (QARD) through the National Quality Agenda IT System (NQA ITS) or call 1300 307 415 and Communicable Disease Prevention and Control Unit;
 - the child or staff member is excluded from the service in accordance with the 14-day quarantine period
 - a quarantined child or staff member does not return to the service until they have completed quarantine and are well
- supporting the Nominated Supervisor and the educators/staff at the service to implement the distancing, cleaning and hygiene requirements for COVID-19 prevention
- keeping informed about current COVID-19 information and policy developments
- issue a direction that educators, staff and/or children not attend the service if they also attend other places of care (i.e. childcare and FAK) where it is determined that this is necessary to reduce the risk of cross site infection and comply with the *Occupational Health and Safety Act 2004*

The Nominated Supervisor and Person in Day-to-Day Charge are responsible for:

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- ensuring that where there is an occurrence of a positive COVID-19 case at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))
- ensuring that where there is an occurrence of a positive COVID-19 case at the service, a parent/guardian or authorised emergency contact of each child at the service is notified of the occurrence as soon as is practicable (Regulation 88(2)) through escalation to the Executive Committee
- ensuring that a child is excluded from the service in accordance with the recommended minimum exclusion periods (refer to Definitions) when informed that the child has received a positive COVID-19 test result or has been in close contact with a person who has tested positive for COVID-19 as required under Regulation 85(1) of the Public Health and Wellbeing Regulations 2009
- notifying the Approved Provider of any positive COVID-19 case at the service
- ensuring all surfaces and play equipment are wiped and sanitised each day;
- establishing good hygiene and infection control procedures, and ensuring that they are adhered to by everyone at the service (Attachment 6 – Risk Register)
- requesting that parents/guardians notify the service if their child has, or is suspected of having, COVID-19, including circumstances where the child is a close contact of a person with COVID-19
- requesting that parents/guardians notify the service if their child is a close contact of someone in quarantine
- requesting that parents/guardians notify the service if their child is a close contact of someone with possible COVID-19 symptoms
- if the Approved Provider has issued a direction that educators, staff and/or children not attend the service if they also attend other places of care (i.e. childcare and FAK) to reduce the risk of cross site infection and comply with the *Occupational Health and Safety Act 2004* ensure that this direction is communicated to educators, staff, parents and guardians
- maintaining confidentiality at all times (refer to Privacy and Confidentiality Policy).

All educators are responsible for:

- ensuring they do not attend the service if:
 - they are unwell / ill, including exhibiting any symptoms;
 - are awaiting test results for COVID-19;
 - have received a positive COVID-19 test result;
 - any close contacts or family (1) have symptoms or (2) are in quarantine (whether positive, negative or still awaiting test results) (including someone arriving to Australia from overseas);
- informing the Approved Provider, Nominated Supervisor or Persons in Day-to-Day Charge as soon as practicable if:
 - they test positive to COVID-19;
 - they are being tested for COVID-19;
 - they are living with someone in quarantine (including someone arriving to Australia from overseas);
 - they are a close contact of a person with COVID-19;
- if the Approved Provider has issued a direction that educators and/or staff not attend the service if they also attend other places of care (i.e. childcare and FAK) to reduce the risk of cross site

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infection and comply with the *Occupational Health and Safety Act 2004*, ensure that they comply with this direction

- providing written clearance from a doctor after undertaking a test, a period of isolation or quarantine related to COVID-19 confirming they/family member returned a negative test and/or are not contagious and may return to the service
- checking the temperature of each child upon entry to the service each day (and wearing a mask whilst doing so)
- requesting parents/guardians to notify the service if their child has, or is suspected of having, COVID-19
- requesting parents/guardians to notify the service if their child is a close contact of someone in quarantine (including someone arriving to Australia from overseas)
- requesting parents/guardians to notify the service if their child is a close contact of someone with possible COVID-19 symptoms
- observing signs and symptoms of children who may appear unwell and informing the Nominated Supervisor or Person in Day-to-Day Charge
- monitoring any symptoms in children that may indicate the presence of COVID-19 and taking appropriate measures to minimise cross-infection
- maintaining accurate records of each person attending the service or premises, including records of contact details
- complying with the *Hygiene Policy* and the *Dealing with Infectious Diseases Policy* of the service
- if requested by the Approved Provider, ensure that they not attend the service if they also attend other places of care to reduce the risk of cross site infection
- complying with physical distancing measures of 1.5m between adults and utilising technology for virtual meetings / conferences etc. wherever possible
- complying with any request to complete a Health Declaration if requested by the Approved Provider or Nominated Supervisor declaring they are healthy, do not have any symptoms of COVID-19, are not a close contact with someone who has COVID-19 and any other matter the Approved Provider or Nominated Supervisor may reasonably require before entering the service
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

Parents/guardians are responsible for:

- ensuring their child does not attend the service if:
 - they are unwell / ill, including exhibiting any symptoms;
 - are awaiting test results for COVID-19;
 - have received a positive COVID-19 test result;
 - any close contacts of the child or family (1) have symptoms or (2) are in quarantine (whether positive, negative or still awaiting test results) (including someone arriving to Australia from overseas);
- informing the Approved Provider, Nominated Supervisor or Persons in Day-to-Day Charge as soon as practicable if:
 - their child tests positive to COVID-19;

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- their child is being tested for COVID-19;
- if their child is living with someone in quarantine (including someone arriving to Australia from overseas);
- if their child is a close contact of a person with COVID-19;
- if the Approved Provider has issued a direction that children not attend the service if they also attend other places of care (i.e. childcare and FAK) to reduce the risk of cross site infection and comply with the *Occupational Health and Safety Act 2004*, ensure that they comply with this direction
- complying with the daily temperature check for their child before entry to the service
- complying with the recommended minimum exclusion periods according to DHHS or as directed by the Approved Provider or Nominated Supervisor
- if requested, providing written clearance from a doctor after a test, a period of isolation or quarantine related to COVID-19 confirming the child/family member returned a negative test and/or are not contagious and may return to the service
- complying with the *Hygiene Policy* and the *Dealing with Infectious Diseases Policy* of the service
- complying with physical distancing measures of 1.5m between adults
- complying with any request to complete a Health Declaration for themselves or their child if requested by the Approved Provider or Nominated Supervisor declaring they are healthy, do not have any symptoms of COVID-19, are not a close contact with someone who has COVID-19 and any other matter the Approved Provider or Nominated Supervisor may reasonably require before entering the service

Volunteers and students, while at the service, are responsible for following this policy and its procedures although during the COVID-19 pandemic additional staff, including parent volunteers, are discouraged from attending the service.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information related to COVID-19 on display and supplied to parents/guardians is current
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures, unless a lesser period is necessary because of a risk.

ATTACHMENTS

- Attachment 1: Closing the service
- Attachment 2: Child or staff member with respiratory symptoms at FAK
- Attachment 3: Close contacts in quarantine

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- Attachment 4: Close contacts with symptoms
 - Attachment 5: DHHS flow chart (pending 7/8/20)
 - Attachment 6: Risk Register

AUTHORISATION

This policy was adopted by the Approved Provider of FAK on 1 September 2020.

REVIEW DATE: 1/SEPTEMBER/2022

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ATTACHMENT 1

Procedure for the Approved Provider and Person with Management or Control to close the service to cease face-to-face learning in response to a confirmed COVID-19 exposure.

1. A member of staff or member of the committee of management is made aware of a suspected or confirmed exposure.
2. Information about the exposure is communicated to members of the executive committee (President, Vice President, Secretary, Treasurer).
3. Teaching staff are informed.
4. If the confirmed case has attended FAK during the 48 hours before their test was undertaken or attended FAU during the 48 hours before the onset of any symptoms of COVID-19, the service will be closed.
5. During service hours:
 - a. emergency contacts are advised to collect any children onsite immediately
 - b. all families or staff who have been present at FAK within 48 hours need to isolate until further advice from DHHS
 - c. If the confirmed positive case is onsite, they should be isolated from others, without causing distress.
 - d. All FAK families are advised the service is closed for a minimum of 72 hours to allow time for DHHS and DET notification and advice.
6. Outside of service hours:
 - a. all families or staff who have been present at FAK within 48 hours need to isolate until further advice from DHHS.
 - b. families are advised the service is closed for a minimum of 72 hours to allow time for DHHS (1800 338 663) and DET (National Quality Agenda IT System 1300 307 415) notification and advice.
7. Communication to staff and families may be via telephone, email, Skoolbag or WhatsApp™ to ensure rapid dissemination of information. A DHHS proforma letter is available (<https://www.education.vic.gov.au/childhood/Pages/closure-preparedness.aspx>).
8. FAK staff and DHHS will work to identify and notify any children and staff identified as having been in close contact with the confirmed case, providing further advice as required.
9. All those identified by DHHS as close contacts will be required to quarantine for 14 days following the most recent exposure to a case while infectious. Close contacts may be requested by DHHS to undergo testing on day 11 of the quarantine period.
10. During the initial closure period (>72 hours), children and staff are asked to isolate at home while DHHS undertakes contact tracing. This includes limiting movements to home-based activities and not attending public places. During this period, if a child or staff member starts to experience symptoms they should:
 - Stay at home
 - Seek medical advice (call ahead to alert your doctor about the confirmed case of coronavirus (COVID-19) at the service and any symptoms before visiting)
 - Seek testing
11. When a negative test has been received and symptoms have completely resolved the staff member/child can return to FAK.
12. DHHS will notify the service when it has completed contact tracing.

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13. A deep clean of FAK will be undertaken in line with DHHS advice (<https://www.education.vic.gov.au/childhood/Pages/closure-preparedness.aspx>).
 14. If someone (staff or child's family) have not been contacted and advised by DHHS that they are a close contact, they no longer need to remain in isolation and can return to FAK as soon as it reopens.
 15. Communication will be emailed as required to families and staff updating them on DHHS tracing, service cleaning and reopening dates.



ATTACHMENT 2

Information for managing a child or staff member with possible COVID-19 symptoms whilst attending the service

It is possible that a child or staff member may develop symptoms of COVID-19 whilst attending FAK. In these instances, it is important to contain any possible spread of virus and remove the unwell person from FAK as fast as possible. Testing should be encouraged.

Child: a member of staff will contact the nominated emergency contact and arrange immediate collection from FAK. Whilst awaiting collection staff will endeavour to isolate the child from other children without causing distress to the child. The parent/guardian should organise COVID-19 testing as soon as practical. A negative test result and resolution of symptoms is required before the child may return to the service. A medical certificate may be required to confirm this. Staff should ensure all surfaces and fomites with which the child was in contact are cleaned.

Staff: the staff member should isolate from children and other staff. The staff member should don a face mask immediately and ensure scrupulous hand hygiene. Efforts should be made to contact another member of staff cover the absence. If staff to student ratios cannot be met, emergency contacts will need to be notified and children collected urgently. The staff member should organise a COVID-19 test as soon as practical. A negative test result and resolution of symptoms is required before the staff member may return to the service. A medical certificate may be required to confirm this. Remaining staff should ensure all surfaces and fomites with which the staff member had contact are cleaned.

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ATTACHMENT 3

Information for ensuring children or staff with close contacts in quarantine do not attend the service.

- A child or staff member may be a close contact of someone in quarantine. This person is at risk of contracting COVID-19 and passing the infection to other children or staff at FAK. As such children or staff with close contacts in quarantine must not attend FAK. Staff should ask the person bringing the child to kindergarten if anyone at home is in quarantine. A person may be in quarantine because:

- they have arrived to Australia from overseas;
- they have tested positive to COVID-19;
- they are awaiting test results for COVID-19; or
- they have been deemed a close contact of a person with COVID-19.

If a child or staff member of FAK is a close contact (e.g. lives in the same house) of a person currently in quarantine:

- The child or staff member must not attend FAK.
- The child's guardian or staff member must notify FAK in a timely manner, of the exposure to someone in quarantine.
- The child or staff member must not return to FAK until the close contact in quarantine is no longer in quarantine.

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ATTACHMENT 4

Information for managing children or staff with close contacts who currently have symptoms of COVID-19

A child or staff member may be a close contact of someone with symptoms that could be attributed to COVID-19. People with these symptoms should isolate at home and get tested. If a person with symptoms refuses to be tested any FAK child or staff member in close contact (e.g. living in the same house) must not attend FAK until the unwell person's symptoms have resolved.

Child: If a child is a close contact of a person who is currently experiencing symptoms that could be related to COVID-19, the child must not attend FAK until the close contact's symptoms have resolved. Staff should ask the person bringing the child to kindergarten if everyone at home has any symptoms of COVID-19. The guardian is encouraged to ensure COVID-19 testing of the close contact who is showing symptoms.

Staff: If a staff member is a close contact of a person who is currently experiencing symptoms that could be related to COVID-19, the staff member must not attend FAK until the close contact's symptoms have resolved. The staff member is encouraged to ensure COVID-19 testing of the close contact who is showing symptoms.

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ATTACHMENT 5

ELAA Process Flow Chart (release date: 7 August 2020)

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ATTACHMENT 6

RISK ASSESSMENT – PANDEMIC/ COVID-19 – Fordham Avenue Kindergarten

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 the most effective way to clean.
2. 'Impractical' is written next to risks that will be hard to mitigate.
3. Cleaning of toys/puzzles/blocks/hard equipment/tables & chairs to be completed at end of each group's weekly session times.

IDENTIFY RISKS	ANALYSE RISKS		EVALUATE RISK CONTROLS
(People, physical assists, finances, etc.)	Likelihood	Consequence	What will be done to manage the risk
Hand washing	High	Major- Not doing this properly can see the virus potentially spreading	1. Everyone washes their hands thoroughly when arriving with foaming hand wash Extra hand washing periodically and will need to be done when hands get soiled e.g. when a child touches their face, mouth, nose or ears, etc. 3. Children taught how to do appropriate hand washing. 4. Hand washing will be done OFTEN throughout the session. 5. Hand sanitiser should be used periodically also
Sandpit play	Medium- High	Major- Cross contamination	1. Hand washing before entering

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	risk of contamination		<ol style="list-style-type: none">2. Raking over sandpit after use3. Wash sand pit toys at end of groups daily sessions4. Remove excess sandpit toys in advance5. Limited amount of sandpit toys available to play with
Dress-ups	Medium - High risk of contamination due to the popularity of the dress-ups and how virus remains on fabric.	Major- Cross contamination	<ol style="list-style-type: none">1. Remove dress-ups temporarily

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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	<ol style="list-style-type: none"> 1. Wash hands before and after playing with toys. 2. Toys will be cleaned at the end of the session. 3. Remove any soiled toys to a crate marked 'Toys to be Washed' and wash and sterilise when there is an opportunity
Playdough	Moderate- High risk of contamination due to the popularity of playdough and hand kneading	Major- Cross contamination	<ol style="list-style-type: none"> 1. Not using playdough at present. <p>Once stages are relaxed we could:</p> <ol style="list-style-type: none"> 2. Individual playdough made to be kept in named zip lock bags for use by individual child only, wash hands prior and after and discard playdough after multiple use. 3. Provide individual playdough pieces to children for personal use only
External Incursion Visitors	Low to moderate (unless the person is infected and then high). Potential unknown of whether visitor has been exposed to virus.	Major- That a visitor could potentially spread the virus	<ol style="list-style-type: none"> 1. All incursions for Term 3 have been postponed. 2. Do not allow any external visitors, work experience students etc. into the service. (Excluding therapists, assistants)
Sign-in book	Moderate-High Potential spread of virus from hands.	Major- Cross contamination	<ol style="list-style-type: none"> 1. Educating team will sign children in on behalf of families. 2. Parents not to sign in personally

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			3. Pens and sign-in table to be kept at a distance from families and washed down after use.
Gate	Moderate to High (as the virus remains on metal for up to 7 - 9 days)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Continued sterilising of gate 2. Gate to be left open when drop off and pick up is occurring with staff member directly beside
Door handles	Moderate to High (as the virus remains on metal for up to 7 - 9 days)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Keep room door opened until all children have arrived to lessen the amount of times that we open and close it 2. Keep office door opened 3. Use paper towel/tissue to open/close doors whenever possible 4. Sterilise any door knobs if they have been touched (e.g. Kitchen door which must remain closed)
Light switches	Moderate to High (as the virus remains for up to 9 days)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Make sure hands are thoroughly washed before turning on light switches. 2. Sterilise light switches whenever they have been used.
Window winders	Low (as it is only staff that use these)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Make sure hands are thoroughly washed before opening windows with winder. 2. Sterilise winders after use.
Remote controls/ipods/UE booms/CD players	Low (as it is only staff that use these)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Wash hands prior and after using 2. Sterilise remotes with disinfectant wipe

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Telephones Rooms and Office	Moderate- High (as it is near one's face and mouth and is shared by staff)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Wash hands or use hand sanitiser prior to and after using 2. Sterilise phone after each use 3. Try and use speaker phone whenever possible to avoid phone mouth pieces being near faces.
Taps	High (as the virus remains on metal for up to 7 - 9 days) and these may contain traces of bodily fluids	Major- Cross contamination	<ol style="list-style-type: none"> 1. Wash down taps frequently before and after use 2. If all children are doing handwashing i.e. for snacks /lunchtimes educating team to turn on taps and leave running whilst all children wash hands to reduce number of times tap is touched. Wash down at completion.
Soap Dispensers	High	Major- Cross contamination	<ol style="list-style-type: none"> 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 to children whenever possible especially during high use times (see above) using gloves 3. Use elbow to push soap dispenser in adult toilet
Tables and Chairs	High (Children inadvertently coughing or sneezing on staff if at face level)	Major- Cross contamination	<ol style="list-style-type: none"> 1. Staff should attempt to keep a sensible social distancing from children. Limit activities which require close contact for instruction of tasks. 2. Staff to remain above the face level of children- not sitting beside children face to face at tables. Remain standing or sit on adult sized chair above height of children's faces.

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Couch	Low - Medium	Major- Cross contamination	<ol style="list-style-type: none"> 1. Staff should remain above the level of the children where possible. Consider children sitting on floor for story whilst staff member reads. No close proximity of children on the couch unless necessary. 2. Avoid sitting on the couch and sit on a wooden chair instead where possible
Outdoor climbing equipment	High- Hands holding obstacle equipment and climbing handles of ladders and posts can have potential for spread	Major- Cross contamination	<ol style="list-style-type: none"> 1. Metal rails of climbing equipment to be washed over twice daily. 2. Children to wash hands before going outside to play.
Drop off & Pick Up – potential for overcrowding	Moderate to high (due to the amount of caregivers, including grandparents, and children gathered in the one area)	Major- Infecting one another if anyone potentially has the virus	<ol style="list-style-type: none"> 1. Drop-off and pick-up to occur from outside the front gated area 2. Parents to remain outside the gate (or in their car) until they see that the area immediately outside our gate is clear 3. Staff to maintain 1.5 metre distance to families on drop off/pick up (unless being the person doing temperature checks) 4. Staff to wear face mask during drop-off and pick-up. 4. Do not allow caregivers to enter the foyer or room at drop-off or pick-up. 5. Meet children at gate. Teacher will sign in children and conduct a temperature check. 6. If in extreme weather teacher will usher children in covered waiting area/undercover patio.

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			<p>7. Extreme weather- If numbers exceed place markers staff will direct families to wait outside until congestion clears. 1 family in, when 1 family out.</p> <p>8. Parent discussions are not to occur during drop off and pick ups. Times for discussions about children should be made by email.</p>
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	<p>1. Wear disposable gloves when filling up drink bottles.</p>
Storage of drink bottles and lunch boxes	High (due to the nature that spittle may be on the outside of these)	Major- Cross contamination	<p>1. Children's lunch boxes/drink bottles to be kept inside their bags- not on the lunch box or drink trolleys</p> <p>2. Remind children to have a drink frequently as bottles not on display</p> <p>3. West end children to bring drink bottles to shelf.</p>
Meal times	High (due to children talking 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	<p>1. Spread children out when eating. Eat at tables to be easily washed down afterwards.</p> <p>2. Consider eating in shifts – half play outside whilst the other group eat and then swap over if numbers of children are higher.</p> <p>4. Ensure children wash their hands thoroughly before and after eating</p> <p>5. Sterilise areas where children will eat prior to and after eating</p> <p>6. Staff to eat their food 1.5m from anyone else and sterilise their area prior and after eating</p> <p>7. Eat outside as much as possible.</p>

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Toilets	High (due to bodily fluids)	Major- High risk of cross contamination	<ol style="list-style-type: none"> 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 using disposable gloves.
Birthday Hat	Low	Major- Cross contamination	<ol style="list-style-type: none"> 1. Remove birthday hat temporarily.
Clothing for staff	Moderate	Major- Moderate risk that lots of bacteria/virus germs have attached themselves	<ol style="list-style-type: none"> 1. Staff to wear aprons throughout the day 2. Wash hands after they have removed them at the end of the day 3. Place in washing bag to be washed in a hot cycle
Photocopier	Low	Major- Cross contamination	<ol style="list-style-type: none"> 1. Wipe down after each use with sterilising spray
Staff - stationery	Low	Major- Cross contamination	<ol style="list-style-type: none"> 1. Staff to have their own stationery kit to avoid cross contamination or 2. Wash their hands prior or after if using shared stationery. 3. Wipe down pens periodically
Compost bin	High	Major- Cross contamination	<ol style="list-style-type: none"> 1. Use disposable gloves when emptying the compost bins 2. Keep the compost bin away from the body so it doesn't soil clothes 3. Have tap on low when washing the compost bin so its contents scraps do not splash towards body 4. Sterilise the sink after it has been washed.

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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 of virus through less social distancing	<ol style="list-style-type: none"> 1. Staff to keep 1.5m distances whenever possible 2. Aim for children to remain 1.5m from staff (unless requiring comfort) 3. Encourage children to remain 1.5m from each other when playing – encourage this by spreading out toys when setting up the room (Impractical) 4. Ask children what they would like to play with and gather toys/items for them. Strategically place them away from peers where possible. 4. Place dots on the floor or limit the amount of children at the mat at one time. Plan mat time experiences in smaller groups. 5. Staff have their break time at different times to each other where possible. 6. Staff may wear facemasks during sessions at their discretion.
Staff sign-in book	Low	Major – cross contamination on pen	<ol style="list-style-type: none"> 1. Staff to use their own pen to sign in and out 2. If staff members forget own pen, wash their hands prior to use of pen and sterilise the pen that they used before and after using it.
Staff breaks	Moderate	Major – cross contamination	<ol style="list-style-type: none"> 1. Staff wash their hands prior to and after eating 2. Staff clean and sterilise the desk that they were eating at. 3. Ensure all cutlery/crockery is washed in hot, soapy water or immediately placed in the dishwasher after use.

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Temperature Checks	Moderate	Minor – Major (dependant on outcome)	<ol style="list-style-type: none"> 1. Temperature checks of all children, adults doing drop off and staff will be taken upon arrival. Keep a running record of staff temperatures so that any deviation in an individual's average temperature can be identified. 2. Any abnormal temperatures (see above) or any above 37.5 will result in immediate need to leave the service 3. Do temperature checks again throughout the day. 4. Temperature checks to be taken with a thermal non-contact forehead temperature scanner 5. Staff member taking temperature checks needs to wear gloves and a face mask.
Ill children and staff	High	Major – staff and children may be at risk of contagion	<ol style="list-style-type: none"> 1. No ill children or staff will be allowed at the centre 2. Anyone who appears unwell or starts to have symptoms of any illness during the day will immediately be sent home.
Injury and Illness forms	Moderate	Major – to help avoid cross contamination	<ol style="list-style-type: none"> 1. Staff to provide illness/injury form to parent on sign out table and move away 1.5 metre distance. Parent to read and sign acknowledgment. 2. Pen provided to parent should be cleaned prior to and following use. 3. Parent to leave the form and provide 1.5 metre distance for collection of form by educators. Collect with gloves.
Adequate equipment	High	Major – without appropriate PPE staff and children are susceptible to the virus.	<ol style="list-style-type: none"> 1. Each morning there needs to be enough PPE for the next 48 hour period as a minimum. This includes antibacterial soap; disposable gloves; duck masks; thermometers; sterilising equipment; cleaning detergent and disinfectant; cleaning mops and buckets; antibacterial floor cleaner; toilet paper. If the centre

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			does not have enough PPE it should not open and receive any children until such time as it does. (From United Workers Union.)
High use areas such as railings, handles etc	Moderate	Major – cross contamination	1. These items/places need to be cleaned every two hours
Nightly thorough cleaning	High	Major – to rid potential virus on equipment	1. Every night, a thorough clean of the whole centre and all equipment will need to be done prior to the following morning.
Cleaning children’s faces (Impractical)	Moderate to High	Major – potential for spread	1. Staff member to wear disposable gloves and wash hands thoroughly as well after cleaning a child’s face.
Applying first aid (Impractical)	High	Major – potential for 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. 2. Sunscreen- encourage children to apply own sunscreen and assist only if required
Upset child (Impractical)	High	Major – as going closer will breach the 1.5m ruling.	1. When a child needs to be consoled, it may be difficult to do this at a 1.5m distance. If possible, gloves and mask should be work and apron changed after close contact with a child.
Suspected case	High	Extreme – this has potential to spread through whole centre.	1. Remove the child/staff member immediately to area of isolation - external if possible 2. Any staff member in attendance needs to wear appropriate PPE 3. Child/staff member must leave the service as soon as possible and seek appropriate medical advice

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			<p>4. If positive to COVID-19, they cannot return for 14 days and until they have had a negative test result.</p>
<p>If there is a case of COVID-19</p>	<p>High</p>	<p>Extreme – this has potential to spread through whole centre.</p>	<p>1. Centre must close immediately 2. Notify Executive Committee</p> <p>2. ACECQA and DHHS and DET notified</p> <p>3. Registered industrial cleaning company to do thorough virus-free cleaning (ELAA of assistance)</p> <p>4. Staff and children to undergo COVID-19 test if directed by DHHS.</p> <p>5. Follow any other directions from government bodies/health departments</p> <p>5. Centre can reopen once all the above is completed.</p> <p>(The above is taken from United Workers Union.)</p>
<p>Flu Shots</p>	<p>High</p>	<p>Major – this will avoid staff and children potentially needing to go to hospital (with the flu) and use hospital resources or to catch the virus at the hospital.</p>	<p>1. All staff to have a flu shot by the 1st May or as soon as possible.</p> <p>2. Families to be advised to consider flu shots.</p>
<p>Personal hygiene with coughing, sneezing, blowing nose, etc.</p>	<p>High</p>	<p>Major – spread is through these sources.</p>	<p>1. Teach children appropriate hygiene</p> <p>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.)</p> <p>3. Posters are displayed in prominent areas as reminders</p>

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			4. Tissues are readily available
Children leaving service	Moderate	Major – stops cross contamination	1. Children wash their hands prior to leaving the service
Staff members leaving the service	Moderate	Major – stops cross contamination	1. Wash hands thoroughly before leaving and use hand sanitiser 2. Place own mobile phone in disposable zip-lock bag 3. Remove apron and place in washing bag to wash. Educators 4. Recommended- Place personal items such as bag, jacket, etc., into a box in car with disposable paper layer or in a disposable plastic bag 5. Recommended- sterilise mobile phone and personal items 6. Recommended- Dispose of paper in box or plastic bag (storing personal items) using disposable gloves 7. Recommended- Have shower and wash hair.
Books in service	Moderate	Major – stops cross contamination	1. Children to wash hands before collecting a book to look at. 2. Books to be wiped over with disinfectant after each group's daily session ends.

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Puzzles in service	Moderate	Major – stops cross contamination	1. Children to wash hands before collecting a puzzle to complete. 2. Puzzles to be wiped over with disinfectant /spray with glen 20 /disinfectant spray after each group’s daily sessions.
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Plan prepared by	Emily-Kate Bateman and Danni Ceravolo – Educational Leader and Nominated Supervisor
Prepared in consultation with:	Regulatory authorities, government bodies, health authorities and unions.
Communicated to:	Staff and Parents
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				
		Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	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
	Rate	Low	Low	Low	Moderate	High