Date Completed	**Apr-26**
Date for review	**Oct-26**

Risk Assessment Scoring Key				
1. Risk Formula	**2. Likelihood (L)**	**3. Severity (S)**	**4. Risk Rating**	**5. Explanation**
Risk Score = Likelihood (L) × Severity (S)	1 = Rare	1 = Minor injury	1–4 = Low (Green)	Before Risk = risk before controls
	2 = Unlikely	2 = Moderate (first aid)	5–9 = Medium (Amber)	After Risk = risk after controls (residual risk)
	3 = Possible	3 = Significant (medical attention)	10–25 = High (Red)	Aim: reduce risk to Low or Medium
	4 = Likely	4 = Major injury		
	5 = Very Likely	5 = Severe / fatal		

Hazard	Who might be harmed	What are the risks	Likelihood (Before controls)	Severity (Before)	Risk Score (Before controls)	What is being done to control the risks	What further action do you need to take to control the risks ? 6 monthly reviews	Who needs to carry out the action?	Checks D-Daily W-Weekly M-Monthly T-Termly	When is the action needed by?	Likelihood (After)	Severity (After)	Risk Scre (After controls)
Slips, trips and falls.	Staff ,children and visitors	Children or staff may slip, trip, or fall due to wet floors or obstacles, potentially resulting in bruises, sprains or fractures.	2	3	6	Floors are kept clean, dry, and free from obstruction at all times. Spillages are cleaned immediately and wet floor signage is used where required. Entrance areas are monitored during wet weather, and daily checks are carried out to ensure safe walking areas.	Consider monthly accident data on famly against children , reoccurence , environment and make swift changes as required . Remind staff in bulletins of roles and responsibilities in relation to slips, trips and falls.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments Maintenance staff / Site manager (if applicable) – carry out repairs or secure furniture	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Furniture and fixtures- (cupboards, doors, units, equipment)	Staff ,children and visitors	Risk of injury from sharp edges or corners Fingers trapped in doors, drawers, or hinges Furniture tipping or falling if not secured Broken or damaged equipment causing cuts or harm Heavy items falling from shelves or units Climbing on furniture leading to falls	2	3	6	Ensure all furniture is stable, in good condition, and appropriate for children's use Secure tall furniture and units to the wall where necessary Use safety hinges or finger guards on doors and cupboards where possible Carry out daily checks to identify any damage or faults Remove or report any broken equipment immediately Store heavy items safely and out of children's reach Supervise children and discourage climbing on furniture	Ensure all furniture is checked daily for stability and damage Report and remove any broken or unsafe items immediately Install corner protectors or finger guards where required Secure tall or heavy furniture to the wall Review room layout to minimise climbing risks Reinforce supervision in areas where children may climb Provide staff reminders or training where needed Update risk assessment following any incidents or changes	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments Maintenance staff / Site manager (if applicable) – carry out repairs or secure furniture	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Messy and Food Play	Children and staff	Messy and Food Play – Babies (0–2 years) Hazards: Choking on small or hard food items Allergic reactions Putting non-food items in mouth Slipping on spillages Skin irritation Messy and Food Play – Toddlers (2–3 years) Hazards: Choking due to developing chewing skills Allergic reactions Throwing food leading to slips Cross-contamination Ingesting inappropriate materials Messy and Food Play – Preschool (3–5 years) Hazards: Allergic reactions Slips from spillages Misuse of tools (e.g. spoons, child-safe knives) Poor hygiene practices Cross-contamination	5	5	10	Ensure all allergies and dietary requirements are up to date and clearly accessible to kitchen and room staff. Follow all food safety and storage guidelines at all times. Ensure food is prepared and given in safe, age-appropriate sizes to reduce choking risks. Supervise children closely during eating and play. Support and model safe eating and play behaviours. Do not allow children to run or move around while eating. Promote and support handwashing before and after meals and play. Reinforce good hygiene practices, including cleaning tables before and after use. Clean as you go to maintain a safe and hygienic environment. Clean spillages immediately to prevent slips and accidents. Ensure all resources and equipment are safe and age-appropriate All staff are first aid trained within the first 3 months of employment. Teach children how to safely handle tools and food. Encourage independence while maintaining appropriate supervision.	Review allergy information regularly and update as required Adapt activities to meet individual children's needs Provide staff reminders/training on food safety and choking risks if needed	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	**D**	Immediately for any hazards identified Daily / before each activity for checks and preparation Ongoing for supervision and hygiene practices.	2	2	4
Safer eating-dietaries, intolerances, and allergies	Staff ,children and visitors	Individuals with known allergies or intolerances are at risk of an adverse reaction if they consume foods to which they are allergic or intolerant. Choking due to food not being prepared correctly or safely. Inadequate handwashing before and after meals. Spillages not cleaned up properly. Food served to hot to children causing burns or scalds. Improper storage of foods. Food throwing of misuse of utensils. Children being given incorrect food for their age and stage of development.	3	3	9	Individual menu care plans in place for children with allergy and dietary needs. These are uploaded onto the childs Famly account and reviewed as and when required. Any child or staff member with a serve allergy who requires an epi pen or emergency treatment all details and medication are kept on display and within reach of the manager in the office.	Ongoing discussions are had with parents/carers and individual dietary menu care plans are updated as and when required. Monthly checks carried out on epi pens and any medication required for children at the nursery. All staff first aid trained within the first 3 months of joining. Staff complete food allergens and intolerance training upon induction. Staff complete allergens and anaphlaxis training. Nursery cooks receive allergens training during their induction, and this is refreshed every 2 years. Any choking incidents are recorded on an incident form via Famly and parents are informed as soon as possible via telephone call. During a child's settling in period on going discussions are had with parents/carers about the stage their child is at in regard to introducing solid foods, including to understand the texture the child is familiar with. A menu care plan will be put in place once this discussions are had for children who are weaning to ensure we support each child;s individual development needs. These plans will also be updated as when required as the child moves along their weaning stages.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments Kitchen staff liase with manager-check numbers and children they will be catering for that day	**D & M**	Immediately for any hazards identified Daily / before each activity for checks and preparation Ongoing for supervision and hygiene practices.	2	2	4

Manual Handling	Staff and children	Risk injuries or back pain from handling heavy/bulky objects. Child being dropped by lifting or carrying incorrectly.	3	4	12	All staff recieve manual handling training upon induction and refresher training during staff meetings. Staff are observed throughout the day how they are lifting objects and children by senior managers, nursery managers and room leaders. Staff encourage children if applicable to climb onto chairs and changing tables with the supervision of adult. Ensure correct techniques are used when lifting children and heavy objects. Frequently used items stored at waist hight to avoid excessive bending and stretching.	Consider training for staff in house anually. Bulletings sent to staff on the correct manual handling procedures.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	2	2	4
Computers	Staff	Poor posture leading to back, neck or shoulder pain. Eye strain and fatigue due to prolonged screen time or flare from light. Faulty equipment posing risk of electric shock. Risk of data breaches if sensitive data is not handled securly. Unauthorised access to confidential information.	1	2	2	Reassessment to be carried out at any change to work feature, e.g. equipment, furniture or the work environment such as lighting. Workstation and equipment set to ensure good posture and to avoid glare and reflections on the screen. Shared workstations are assessed for all users. Work planned to include regular breaks or change of activity. Adjustable blinds at window to control natural light on screen. Norton antivirus checks carried out weekly.	Staff complete GDPR training and refresher training.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Electricity	Children, staff and visitors	Shocks or burns from faulty electrical equipment. Electrical faults that can also lead to fires. 3 main hazards of electricity are contact with life parts, faults which cause fire, explosions where electricity can be the source of ignition.	3	4	12	Ensure plug sockets are suitable for the environment. Staff are trained in basic electrical safety and do pre-use visual checks. Any defective equipment, plugs, discoloured sockets, damaged cables and on/off switches are promptly reported, and a method instigated to stop their use. Any faulty equipment is promptly taken out of use. Managers know where the fuse box is and how to safely turn off the electricity in an emergency. Safety checks of the electrical equipment and installations are carried out to ensure that the equipment continues to be safe. Where necessary this is done by a competent electrician. Staff not permitted to bring in their own devices or charges from home. Periodical checks are made of the fixed insulations by a competent person. Visual checks of electrical items undertaken in daily room risk assessment. Display electrical shock plaque card on electrical cupboards	Staff are given training to recognise electrical hazards and report as soon as possible. Ensure first aid procedures are in place for electrical injuries. PAT testing completed.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	2	6
Legionella-bacteria growing in the hot and cold water systems that service the whole property, e.g. in shower heads, hose pipes, outside taps, hot water outlets.	Children, staff and visitors	Using hot and cold-water supply could seriously be harmed if legionella is present in water systems.				Legionella's risk assessment carried out. Water temperatures are stored at the correct temperature hot above 60 or above. Cold water to be kept below 20 if possible. Ensure infreqently used outlets are flushed out at least weekly such as shower heads and hose pipes. Use checklists to record tap temperatures. Ensure hose pipes are not stored in direct sun light. After each use hose pipe is removed from water supply to stop any excess water running and being stored inside.	N/A	Maintenance checks Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.			

			3	3	9						1	2	2
COSHH	Children, staff and visitors	Chemical exposure. Ingestion or contact by children. Inhalation hazard. Improper storage. Spillages. Incorrect usage. Allergic reactions. Environmental contamination. Lack of training.	3	5	15	All staff provided with COSHH training upon induction and every 6 months. Or as and when any products are added or reviewed. Staff are trained how to use products correctly and safely. PPE is provided for all staff. Products are used in accordance with safety data sheets and PPE provided. COSSH assessment sheets available via the New Beginnings website for staff to view and update knowledge. Staff to have access via the nursery website to the COSSH assessment sheets. Cleaning products kept out of reach of children and in locked cupboards. Risk assessment for COSHH in place and reviewed in line with changes and legislation. 6 monthly reviews. Dispose of hazardous substances according to manufacturer guidelines. COSHH training completed by staff.	Products and data sheets reviewed every 6 months if not before.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	D	Immediately for any identified hazards; otherwise ongoing and reviewed every 6 months.	3	2	6
Ventilation	Children, staff and visitors	Inadequate ventilation risk of respiratory infections spreading across the nursery. Rooms that are too hot, cold, or stuffy reduce children's comfort, concentration, and engagement. Staff may experience fatigue or discomfort, affecting supervision and care quality.	3	3	9	Ensure appropraite ventalation within rooms but that rooms are always kept at a suitable and comfortable temperature. Within the hotter months cooling fans supplied within the nursery rooms. Heating used to ensure comfort levels are maintained in occupied areas.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Temperature & lightening	Children, staff and visitors	Rooms to cold risk of hypothermia/rooms to hot risk of overheating. Rooms be coming too hot can cause discomfort, dehydration, or heat stress in children and staff. Rooms that are too cold can make children uncomfortable and more prone to illness. Incorrect room temperature in sleep areas increases risk of overheating, especially for babies. Insufficient lighting can lead to trips, falls, or accidents. Lighting that is too dim or too bright can cause eye strain, headaches, or discomfort for staff and children. Lighting not suitable for activities (e.g. too dim for play, too bright for sleep/rest areas). Unsafe or damaged lighting fixtures may pose risk of electric shock or fire.	3	3	9	Maintain safe room temperatures. Ensure good ventilation (open windows safely, use airflow systems where available). Use blinds or curtains to reduce direct sunlight. Ensure heating systems are working effectively and maintained regularly. Lightening systems are regular inspected. Switches and fixtures out of children's reach where appropriate.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – oversight, arrange repairs, update risk assessments		Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2

Accident & incident reporting	Children, staff and visitors	If an accident is not reported this poses a risk to either the child or staff member it has happened to. Delayed medical attention. Safeguarding concerns for example patterns of injuries or concerns being missed for the child. Parents/carers are not informed about incidents involving their child. Loss of trust and potential complaints. Failure to meet regulatory requirements (e.g. accident recording and reporting). Potential breaches of duty of care and liability risks.	4	5	20	All accidents and incidents are reported to the nursery manager and documented on the child's Famly account. Report any incident or accident as required to the enforcing authorities. Monthly accident evaluation reporting are run from Famly to for review by a senior manager. Head accidents are reported to a manager, manager makes contact with parent/carer to inform them of the bump and child is monitored closely throughout the door for any changes in behaviour. Staff trained on how to complete accident and incidents reports via famly.	Monthly reviews of all accidents and incidents recorded. Any patterns or trends are reviewed to see if any changes need to be made to the room or environment to reduce accidents. First aid and Accident policy reviewed annually and when any updates are required.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – monthly reports evaluated and reviewed.	**D & M**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	6
Unsuitable people	Children, staff and visitors	Checks not carried out could result un suitable people not fit to work with children or unqualified staff working with children. Putting children and staff at risk.	1	2	2	DBS checks are carried out on all new staff members before starting. All staff sign up to the annual update service 2 references are obtained before any new staff member starts at New Beginnings Staff members to complete a disclosure and barring declaration annually All new staff members undergo a 6-month induction period Proof of identity and qualification checks are carried out. Right to work in the UK checks completed on staff who this may apply to. Safeguarding training is provided on the first day of starting.	Regular supervision and performance reviews Whistleblowing procedures encourage reporting concerns Continuous safeguarding training Managers and senior managers completed safer recruitment training.	Manager and senior managers carrying out interviews. Mentors supporting staff on induction.	**Ongoing**	Ongoing and when required	1	2	2
Lone working	Children and staff	Delayed emergency response. Manual handling without support. Personal safety of staff and children. Communication difficultuies.	3	3	9	Lone working is avoided where possible. We have a lone working policy and procedure in place. Another person is always in sound or sight.	N/A	Managers and deputy managers	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	2	2
Security and CCTV	Children, staff and visitors	Secutiry measures breached risk of intruder entering the nursery. CCTV not operable no evidence should there be any break ins or un authorised persons entering the nursery.	3	5	15	Doors, windows and locks are checked daily. CCTV is checked daily and systems updated when required. Lockdown procedures in place and termly lock downs completed with children and staff.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager – monthly reports evaluated and reviewed.	**D**		3	3	9
Intruder	Children, staff and visitors	Unauthorised person attempting to take a child, staff or visitor. The nursery building damaged, property stolen or damaged. Exposure to inappropriate behaviour or language. Threats, voilence or intimidation towards staff and children placed in a high pressured emergency situation. Unauthorised person having access to confidential records.	3	3	9	Ensure all entry and exit points are locked, secured and/or supervised appropriately to prevent children leaving or anyone unathorised person entering the nursery and grounds. Doors & windows locked and alarm set when leaving the nursery grounds at the end of the day. CCTV in operation externally on the building. All staff are trained in following our lockdown procedure should an authorised person enter the grounds or the building. Ensure garden gate padlocks are always secure and in good working order. Garden perimeters checked any gaps are reported immediately and made secure.	Lockdown drills are conducted each term to help staff and children become familiar with the procedures and associated signals.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	3
Medical administration	Children, staff and visitors	Incorrect medication or dosage given to a child could cause a reaction. Incorrect timing given to early or to late could reduce the effectiveness of the medication. Allergic reactions from the medication given. Unsafe storage left within children's reach, not stored in a fridge if needed.				Medication form compelted with parent before any medication is given to the child. No medication is given without an acknowledge medication form via Famly. Any medication is given by a trained first aider. All medication is stored in a locked cabinet or fridge not in reach of children. We do not take any medication in un less clearly labelled with the childs name, expires dates, and dosages required. Keep accurate up to date records of any medication given. Any child who requires on going medication within the nursery will have a health care plan in place. Policies and	Monthly checks carried out on all medication stored at the nursery. Health care plans are reviewed every 3 months or as and when required.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	**D**	Immediately for any identified hazards; otherwise ongoing and reviewed daily.			

			2	5	10	procedures are in place in the case of any medical emergencies.					3	2	6
PPE (Personal protective equipment)	Staff and visitors	Improper use of PPE could result in the spread of germs and infectious diseases. Not changing PPE in between tasks can result in cross contamination. Allergic reactions to materials such as skin irritation and breathing difficulties. Choking or suffocation hazard if PPE is left out children may put items in their mouth. Improper disposal of PPE equipment can spread infection and create hygiene hazards in the environment.	2	3	6	Staff are trained on the correct use and removal of PPE Always wash hands before and after using PPE Non-latex PPE is provided for staff with allergies PPE is stored safely out of children's reach PPE is disposed off in appropriate bins immediately after use PPE is used appropriately without replacing good hygiene practices Adequate PPE is ordered to ensure supplies never run out	Stock checks carried out on PPE to ensure sufficent supply is always available	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager		Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
First Aid	Children, staff and visitors	Delayed or incorrect treatment given could worsen condition, injuries may not be treated promptly. Increased risk to children through lack of training. Staff not being aware of how to repsond to life threatening situations.	2	5	10	All staff complete first aid training within the first three months of their probation period, ensuring that all team members are trained in first aid. First aid boxes are suitably stocked and accessible at various points throughout the nursery. A first aid box is always taken when staff and children are in the garden or on outings. The setting has achieved Millie's Mark accreditation, which is renewed every three years (next renewal due February 2027). The annual Millie's Mark declaration is completed as required. First aid box checks are carried out monthly to ensure contents are complete and in date. A designated appointed person is responsible for overseeing first aid arrangements. Please refer to the list of designated first aiders for details. Staff are provided with reguarly refresher training and courses to ensure they knowledge is kept current and up to date.	Staff complete first aid training every 3 years. In between this also complete refresher training and continually testing staff knowledge on understanding the importance of first aid training. Medical cupboards are securly locked.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	9
Outings	Children, staff and visitors	Supervision and safety risks children becoming lost from the group. Environmental risks traffic and road crossings. Weather conditions, uneven grounds. Contact with unfamiliar adults, unpredictable behavour from members of the public. Behaviour risks children not following instructions, running off from adults, distressed in an unfamiliar environment. Delays in emergency responses, unable to contact nursery or parents.	3	4	12	Risk assessments are completed prior to any outing taking place. Managers carry out trial (dummy) routes and visit the premises in advance to ensure suitability and safety. Appropriate adult-to-child ratios are always maintained throughout the outing. Both children and staff wear high-visibility jackets to ensure they are easily seen. Emergency contact details and a fully equipped first aid kit and any childs medical equipment or medicine is taken on every outing. Parents/carers are informed in advance, and written consent is obtained before any child participates in an outing.	During group times, the importance of "stranger danger" is discussed with children in an age-appropriate way. Practitioners support children in understanding how to stay safe while outside. We also cover key safety topics such as road safety and how to keep safe in different outdoor environments, helping children to develop an awareness of potential risks and how to respond appropriately.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	2	6
Nappy and toileting	Children and staff	A child being left un attended in the toileting areas or changing tables Poor manual handling when lifting a child onto nappy changing tables. Safeguarding concerns (privacy not maintained, inappropriate practice) Cross contamination, spread of infection, unsafe or unclean changing surfaces.	2	3	6	Children are never left un attended in the bathroom areas or changing units. Staff trained in manual handling and the correct way to lift children gently. Staff are trained in safeguarding procedures. Staff are trained to ensure good hygiene practise is followed washing hands, disposing of gloves, cleaning and disinfecting areas.	Upon induction staff are trained in toileting and nappy changing procedures.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Sleeping children	Children	Physical environmental risks-damaged cots, unsafe matresses, unsuitable bedding increasing suffocation risk. Incorrect room temperature causing over heating or hypothermia. Children being placed in incorrect sleep positions. Loose bedding or items that could cause suffocation. Children sleeping in unsafe places for example bean bags, sofas or buggies left un supervised. Sleep checks not being completed.	3	3	9	Cots and mattresses are maintained in a safe, suitable condition. Daily checks are carried out to identify any signs of damage, wear, or instability. Sleep mats are inspected regularly. Any mats showing signs of wear and tear, damage, or exposed foam are removed immediately and replaced. Children's positioning must follow safe sleep guidance. Children must be placed down on their back in their own seperate sleep space on a firm flat surface face-to-feet in relation to those on neighbouring sleep mats to reduce risk. Sleep spaces contain a firm, flat, waterproof mattress and light weight bedding which is firmly tucked in around the child below their shoulders to prevent head covering. Alternatively, a well fitted baby sleep bag may be used. Manufacturers recommendations must be checked before using a baby sleep bag. Where blankets are used, the child must be placed feet-to-foot at the bottom of the cot, with blankets tucked in. Cots must not contatin any extra items such as pillows, extra blankets, bumpers, wedges or straps and items must not be hung or draped over cots, including bed bags, blankets, bibs, or any loose materials, to prevent suffocation or entanglement hazards. Windows in sleep areas must be kept closed where appropriate, and all cords (e.g., blinds) are securely tied up and kept out of reach to prevent strangulation risks. Childre should not get too hot ot cold. The recommended room temperature for babies is 16-20 . Childrens heads must not be covered. Children who just start the nursery or under 6 months sleep checks are carried out every 5 minutes. Children are always within sight and hearing of staff when sleeping. Sleep check procedures must be clearly outlined in policies. Staff must carry out and record regular checks in line with these policies. Management oversight: Managers must continuously monitor and review the effectiveness of sleep safety policies and procedures to ensure compliance and ongoing child safety. All mattresses are BS 7177:2008+A1:2011 complaint.	Staff are trained during induction on how to safely put children to sleep. Managers reguarly check on sleep times to ensure safer sleep requirements and our sleep policy and procedure are being followed. Follow the updated sleep guidance https://help-for-early-years-providers.education.gov.uk/health-and-wellbeing/safer-sleep We ensure all staff read the NHS sudden infant death syndrome guidance and for further information the Lullaby trust. https://www.nhs.uk/baby/caring-for-a-newborn/sudden-infant-death-syndrome-sids/	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2

Screen time	Children	Excessive screen time. Accessing inappropraite content. Eye strain, poor posture. Trip hazards from equipment. Damage to equipment. Reduced social interactions.	3	3	9	Screen time is limited to 15 minutes per time no more then total time 1 hour each day. No screen time for under 2 years. Educational games and content are the sole use when children are using the ipads. Devices are securly controlled and do not have internet access. When the childrens ipads are in use a member of staff are with the children using the ipads.	All staff complete training in online safety.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	1	2
Cyber security	Children, staff and visitors	Cyber security risks-unauthorised access to confidential information, data breaches, weak passwords, improper data storage. Malware and viruses on computers, tablets or USB drives. Inappropriate website access children and staff accessing unsafe content. Lack of staff training. Images of children stored or shared insecurely, Use of unauthorised apps or platforms, Children exposed to online risks	4	3	12	Norton antivirus checks carried out weekly Restricted access on nursery iPads used with the nursery rooms. Strong passwords updated and changed regularly Weekly clear ups on iPads carried out by nursery managers photos/videos deleted which are no longer used Staff complete training on online safety Restricted access levels (only authorised staff see sensitive data) Approved apps/platforms only for communication Routine data backups and recovery plans Clear reporting procedure for cyber incidents	Regular audits are carried out of systems and data access.	Room staff / Key persons – daily checks, supervision, reporting issues Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	2	6
Kitchen compliance	Children, staff and visitors	Food safety hazards-poor hygiene, cross contamination. Allergen and dietary risks. Stock rotation not complete correctly result in out of date food being used incorrectly.	3	5	15	Theomometers used to check temperatures of foods before being served. Fridge and freezer temperatures checked daily. Fridge and freezers NOT turned off at the end of each day always kept on. Kitchen diary folder completed daily by nursery cooks. Allergen and dietary managment controls in place. Access to kitchen is limited. Food safety inspections carried out in the kitchens every 18 months.	Limit kitchen access to authorised staff only; children should not enter unsupervised. Training given to kitchen staff regularly.	Kitchen staff/Housekeepers-reporting any issues Nursery Manager/Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	9
Kitchen-knives	Children, staff and visitors	Injuries Cuts and lacerations to staff or children when using knives Severe injury from improper handling or misuse Accidental injury to others when carrying knives around the kitchen Slips while holding knives, increasing severity of injury Knives not accounted for (missing items not noticed promptly) Inappropriate access to knives outside supervised activities Children accessing knives due to poor storage or supervision Children misusing knives during activities (e.g. food prep sessions) Inadequate supervision when children are using age-appropriate knives	3	5	15	Staff training: All staff must be trained in the safe handling and use of knives, including correct cutting techniques and safe carrying practices. Safe storage: Knives must be stored securely when not in use (e.g. in locked drawers, knife blocks, or designated storage areas) and always kept out of reach of children. First aid provision: A fully stocked first aid box must be readily available at all times, and a nominated first aider must always be on site to respond to any injuries. Knife accountability: Photographs and records of all kitchen knives must be maintained in the daily kitchen record book. Kitchen staff must ensure all knives are accounted for and securely stored at the end of each day.	Ensure only suitable knives are used for each task (e.g. smaller or safety knives for certain tasks or when children knives when carrying out cooking activities). Staff receive regularly training on how to use knives correctly. Restricted access: Limit kitchen access to authorised staff only; children should not enter unsupervised.	Kitchen staff/Housekeepers-reporting any issues Nursery Manager/Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	9
Contact with heat Steam, hot water, and hot surfaces	Children, staff and visitors	Burns and scalds. Staff injury spillages from hot liquid, carrying hot items leading to accidents if knocked or dropped. Children accessing hot items for example food if not cooled down correctly before serving. Incorrect use of equipment. Hot items of equipment left un attended.	3	5	15	Use of oven gloves and heat resistance equipment. Hot items are never taken into any of the nursery rooms no to drinks allowed apart from in staff communal areas. Hot food is cooled down before being served to the children. Hot water signs are displayed at the sinks. Staff are first aid trained in burn prevention and first aid.	All staff complete first aid training.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Working from height	Children, staff and visitors	Fall risk due to loss of balance, using inappropriate equipment. Dropping equipment from a height causing injury to those below. Lack of staff training and awareness. Children accessing equipment to climb and fall from height.	2	5	10	Appropriate equipment, e.g. suitable ladder (BS), is provided and staff are trained on how to use them safely. Condition of equipment is checked before every use. Staff must use appropriate equipment when working from a height.	Staff receive training when working from a height.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2

Fire & emergency procedures	Children, staff and visitors	Staff, children or a visitor are trapped during a fire fatal injuries could be suffered from smoke, inhalation or burns. Delayed evacuation risk due to lack of staff knowledge or unclear on procedures. Fire spreading due to flammable materials, faulty equipment, overloaded sockets, improper storage of flamable equipment.	3	5	15	Seperate fire risk assessment carried out. Termly fire drills carried out. Designated fire wardens and responsibile persons in place. Fire evacuation routes kept clear at all times. All windows and fire doors unlocked and kept clear throughout the day. All electrical appliances switched off at the end of each day. (Apart from appliances that cannot be due to health and safety such a fridges and freezers).	Staff receive fire safety training, fire warden training. Designated fire wardens assigned within each room to lead their room during an evacuation.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager "	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	9
Emergency procedures	Children, staff and visitors	Incorrect procedure being followed could result in injuries.	3	3	9	Permission from parents/carers to seek medical care for their child in the event of an incident. Checks are carried out on admissions paperwork to ensure children give consent for medical attention. Any child on a health care plans instructions will be followed to ensure correct adminstration of any medication or procedures are followed.	Policies and procedures in place.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	2	2	4
Smoking and Vaping	Children, staff and visitors	Risk of fire if anyone smokes on the premises. Risk to others peoples health. Vaping device battery failures overheating or exploding batteries.	3	3	9	A no smoking and vaping policy is in place. If staff wish to smoke or vape during their breaks they are advise to do this away from the nursery grounds.	Upon induction staff the no smoking and vaping policy is gone through. This policy is reviewed regularly.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Stress	Children and visitors	Workloads long working hours, excessive workloads. Low support and lack of guidance from managers. Relationships issues with others in the workplace. Inaqequate training not understanding their job role.	3	2	6	Staff under take an induction process which gives them support and guidance on understannding their job role, training courses to support them and also assigned a mentor to support them throughout their induction period. Supervisions and appraisals carried out with all staff to discuss any concerns or support they feel they need. Staff have access to our employee assist programe 24 hours a day 7 days a week. We have trained mental health first aiders within the nursery.	Supervisions carried out once a term. Appraisals carried out yearly. However should staff need to talk to managers before these meetings we have an open door policy to encourage them to speak out.	Room staff / Key persons – supervision Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager-Supervisions and appraisals	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Trade and Clinical Waste	Children, staff and visitors	Infection and contamination if waste is not collected and bins are over flowing. Pest infestation if waste is not managed and collected within the correct time scale. Hazardous and chemical items disposed in bins pose a risk. Manual handling injuries lifting heavy bins or bags. Fire risk due to a build up of combustible waste.	4	5	20	Appropraite bins are used and sorted into different types of clinical waste food, recycling and general. Reguarly waste bin collections are in place for the different types of waste. Any waste over flowing is reported as soon as possible and a collection arranged. Ensure staff wear PPE when removing waste.	Designated waste storage area. Training provided to staff in manual handling and hygiene.	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	3	3	9
Pregnant staff	Staff	Manual handling. Infectious diseases. Tierdness due to long working hours. Stress of workload. Slip, trips or falls. Exposure to chemicals. Physical contact and behavioural risks. Prolonged standing or sitting.	3	3	9	Individual risk assessments to be put in place to ensure duties carried out do not put pregnant person at risk, consideration given to extra breaks, changing routines etc. This are reviewed and any changes made un till the staff member leaves for maternity leave.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Sandpit Area	Children, staff and visitors	Infection and contamination due to animal faeces, dirty hands or bodily fluids. Ingestion of sand choking or illness. Sand in eyes or dust inhalation. Allergic reaction or skin irritation. Trips and slips.	2	2	4	Sand pits are always covered when not in use. Sand play is supervised by an adult at all times. Spillages are always swept up and kept clear. Hands are always washed after playing with the sand.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Water Area	Children, staff and visitors	Slips, trips and falls if water is split and not cleared up. Contaminated water risk of legionella. Water ingestion while playing. Skin irritation.	2	2	4	All spillages are cleaned up immediatley. Water play is changed daily and when required for example it becomes un clean. Children are supervised at all times during water play. First aid kit to be available and a first aid trained member of staff to be always available outdoors.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Mud kitchen	Children, staff and visitors	Infection and contamination. Ingestion of mud or dirty water. Mud in the eyes. Allergic or skin irritation. Slips, trips & falls.	2	2	4	Only safe and designated mud kitchen is used for children to play in. Area is checked daily for contamination. Handwashing after playing in the mud kitchen. Children are supervised at all times while playing in the mud kitchen. Any spillages are cleaned up as soon as possible. First aid kit to be available and a first aid trained member of staff to be always available outdoors.	N/A	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2

Growing Area	Children, staff and visitors	Soil contamination, insects and wildlife bites, stings or allergic reactions. Skin contact with plants. Trips and falls. Ingestion of soil or plants.	2	2	4	Reguarly inspections of the area before it is accessed by children. First aid kit to be available and a first aid trained member of staff to be always available outdoors. Area is supervised at all times when children are occupying it. Handwashing once coming in from the garden.	Operational planning to consider staff deployment and areas of the garden which will be in operation	"Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2
Top deck Areas	Children, staff and visitors	Uneven ground- slips, trips and falls	2	2	4	First aid kit to be available and a first aid trained member of staff to be always available outdoors.	Operational planning to consider staff deployment and areas of the garden which will be in operation	Room staff / Key persons – daily checks, supervision, reporting issues Kitchen staff/housekeepers Room Leader – ensure checks are completed and actions followed Nursery Manager / Deputy Manager	D	Immediately for any identified hazards; otherwise ongoing and reviewed daily.	1	2	2