

## RISK ASSESSMENT: Hygiene

**Service Name:** St Dunstan's Kindergarten

**Date Completed:** January 2026

**Assessment Review Date:** January 2029

**Completed by:** Nikki Samuel – Nominated Supervisor

- **1. Hand Hygiene**

- Hazards:

- Spread of germs and infections (cold, flu, gastrointestinal infections, COVID-19) due to inadequate handwashing.
- Risk Level: High – young children often put hands in mouth and touch surfaces.
- Control Measures:
- Teach children proper handwashing technique (soap and water for 20 seconds).
- Supervised handwashing before meals, after toilet use, after sneezing/coughing, and after outdoor play.
- Provide child-friendly sinks and soap dispensers.
- Use alcohol-based hand sanitizer when handwashing is not possible.
- Display visual prompts/posters on handwashing.

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- **2. Toileting & Nappy Changing**

- Hazards:

- Spread of infection from fecal-oral transmission (diarrhea, hepatitis A, gastroenteritis).
- Skin irritation or injury during nappy changing.
- Risk Level: High – due to young age and need for assistance.
- Control Measures:
- Designated changing area with easy-to-clean surfaces.
- Staff to wear disposable gloves and aprons.
- Dispose of nappies in sealed bins.
- Ensure proper handwashing of staff and children afterward.
- Clean and disinfect changing areas regularly.

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- **3. Food Hygiene & Mealtime**

- Hazards:

- Foodborne illnesses due to improper storage, preparation, or handling.
    - Allergic reactions.
    - Risk Level: Medium to high – children are particularly vulnerable.
    - Control Measures:
    - Wash hands before meals.
    - Ensure all food is stored at correct temperatures.
    - Regular cleaning of tables, chairs, and utensils.
    - Staff trained in food handling and allergies.
    - Monitor children during mealtimes to avoid choking.
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- **4. Surface & Toy Hygiene**

- Hazards:

- Transmission of germs via shared toys, furniture, or play equipment.
    - Risk Level: Medium – frequent contact among children.
    - Control Measures:
    - Clean toys and frequently touched surfaces daily.
    - Use disinfectants safe for children.
    - Encourage children to wash hands before and after play.
    - Remove broken toys to prevent injury.
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- **5. Respiratory Hygiene**

- Hazards:

- Spread of airborne infections (colds, flu, COVID-19).
    - Risk Level: Medium to high.
    - Control Measures:
    - Teach children to cover mouth/nose when sneezing/coughing.
    - Provide tissues and a no-touch bin.
    - Encourage handwashing after sneezing/coughing.
    - Ensure good ventilation in classrooms.
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- **6. Outdoor Hygiene & Play**

- Hazards:

- Contact with contaminated soil or water (parasites, bacteria).
      - Cuts/scrapes becoming infected.
      - Risk Level: Medium.
      - Control Measures:
      - Ensure children wash hands after outdoor play.
      - Inspect playground equipment regularly.
      - Cover minor cuts promptly and disinfect.
      - Supervise sand/water play areas and clean frequently.
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- **7. Staff and Visitor Hygiene**

- Hazards:

- Transmission of germs from staff or visitors.
      - Risk Level: Medium.
      - Control Measures:
      - Staff and visitors wash hands upon entering.
      - Staff vaccinations up to date.
      - Stay home if unwell.
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- **Summary Table of Risks**

• Area	• Hazard	• Risk Level	• Control Measures
• Hand Hygiene	• Germ transmission	• High	• Supervised handwashing, sanitizer, visual prompts
• Toileting/Nappy Change	• Fecal-oral infection	• High	• Gloves/aprons, handwashing, disinfecting surfaces
• Food Handling	• Foodborne illness, allergies	• High	• Proper storage, cleaning, staff training
• Toys/Surfaces	• Germ transmission	• Medium	• Daily cleaning, remove broken toys
• Respiratory Hygiene	• Airborne infections	• Medium	• Cover sneezes/coughs, tissues, ventilation
• Outdoor Play	• Infection, injuries	• Medium	• Supervised, handwashing, inspect equipment

• Area	• Hazard	• Risk Level	• Control Measures
• Staff/Visitors	• Germ transmission	• Medium	• Handwashing, vaccination, stay home if sick

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- **This assessment can be reviewed every 6–12 months or sooner if there’s an outbreak of illness.**
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