His Royal Highness The Duke of Edinburgh
10 June 1921 to 9 April 2021

Read about the arrangements following The Duke of Edinburgh's death

Department for Education

Guidance

Protective measures for holiday and after-school clubs, and other out-of-school settings during the coronavirus (COVID-19) outbreak

Updated 7 April 2021

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Main changes to this guidance

The main changes include:

- updated advice on the use of face coverings
- updated advice on Lateral Flow Device (LFD) and polymerase chain reaction (PCR) testing and self-isolation
- removing information on who can attend out-of-school settings prior to 29 March
- updated information to reflect the commencement of step 2 of the COVID-19 response – spring 2021

Who this guidance is for

This guidance is for out-of-school setting providers and their staff, who provide, for children (who were under the age of 18 on 31 August 2020):

- community activities
- tuition
- holiday clubs
- breakfast and after-school clubs for children

It applies to:

- providers that fall within the government's definition of an out-of-school setting
- providers caring for children aged 5 and over and registered with Ofsted on either the compulsory or voluntary childcare register
- schools or colleges that offer extra-curricular activities or provision for children before and after school, during weekends or outside of term-time

- providers that offer breakfast, after-school clubs or extra-curricular activities in schools, who should also refer to the guidance on actions for schools during the coronavirus (COVID-19) outbreak.
- registered early years providers caring for children under the age of 5, who should refer to the guidance for early years and childcare providers during the coronavirus (COVID-19) outbreak.
- providers of youth services and activities, who should also refer to the National Youth Agency's guidance for managing youth sector spaces and activities during COVID-19.

There is separate guidance available for parents and carers of children attending out-of-school settings during the coronavirus (COVID-19) outbreak.

Venue-specific guidance

If your out-of-school setting takes place in one of the following premises, you should also follow:

- guidance for places of worship
- guidance for community centres, village halls and other multi-purpose community facilities
- guidance for providers of grassroots sport and leisure facilities
- actions for schools during the coronavirus (COVID-19) outbreak
- guidance on working safely during coronavirus (COVID-19) in other people's homes

Providers operating out of these premises should work with the relevant parties (for example, the owner or voluntary management committee) to agree on and distribute responsibility for protective measures to help prevent the transmission of coronavirus (COVID-19). Read carrying out a risk assessment for more information.

About this guidance

Out-of-school settings can continue to open for indoor and outdoor provision. They should follow the protective measures set out in this guidance.

Evidence continues to confirm that children can be susceptible to coronavirus (COVID-19) infection although a range of analyses suggest that children's susceptibility to infection appears less than adults. The evidence is stronger that pre-school and primary aged children are less susceptible to infection than adults and more mixed for secondary-age and older children.

We know that the new variant of coronavirus (COVID-19) prevalent in the UK is more transmissible, which means it remains very important to follow all the measures in this guidance carefully, especially the system of controls in the infection, protection and control section. We have also recommended additional precautionary measures, where applicable, throughout this guidance to further reduce the risk of transmission.

Who can attend your setting

Until 12 April, out-of-school settings and wraparound providers are able to offer outdoor provision to all children, without restrictions on the purpose for which they may attend and indoor provision to:

- vulnerable children and young people, under any circumstances
- children on free school meals, where they are attending as part of the holiday activities and food programme
- all other children, where the provision is one of the following:
  - reasonably necessary to enable their parents and carers to work, search for work, undertake education or training, or attend a medical appointment or address a medical need, or attend a support group
  - being used by electively home educating parents as part of their arrangements for their child to receive a suitable full-time education
  - being used as part of their efforts to obtain a regulated qualification, meet the entry requirements for an education institution, or undertake exams and assessments

From 12 April, in line with the commencement of step 2 of the COVID-19 response – spring 2021, out-of-school settings and wraparound childcare providers can offer provision to all children, without restriction on the reasons for which they may attend.

We will amend the relevant regulations to allow for each of these easing of restrictions to take place.

You should note that some premises are only permitted to open for certain exempt activities. The COVID-19 response - spring 2021 guidance provides a list of businesses and venues which must remain closed, and those that can open for certain purposes, including registered childcare and supervised activities for children or, where applicable, for education or training.

Children should be encouraged to attend settings close to where they live or go to school. This should, ideally, be within walking or cycling distance.

Shielding advice was paused nationally at midnight on 31 March. As of 1 April, all CEV children and young people can now attend wraparound childcare and out-of-school settings, where they are eligible to do so, unless they are one of the very small number of children or young people under paediatric or other specialist care and have been advised by their GP or clinician not to attend.

Home education

Where a child who is electively home educated takes part in an out-of-school setting, this guidance will apply. This is the case regardless of whether the setting is attended solely by children who are electively home educated or a combination of children attending school and children being home educated.

All children who are electively home educated can attend out-of-school settings where the provision is being used by home educating parents as part of their arrangements for their child to receive a suitable full-time education. They can also use these settings for a limited set of other essential purposes and for any purpose from 12 April. Read who can attend your setting for more detail.

Staff and workforce

You should ensure you have enough staff available to meet the required ratios for your setting. You should have:

- at least one person with first aid training
- at least one person with up-to-date Designated Safeguarding Lead (DSL) training - you may want to consider a deputy DSL to cover if the DSL is unavailable
- a caretaker or cleaning staff if available

If appointing a person to cover these roles, you should carry out the appropriate pre-employment checks to assess their suitability to work with children.

You should ensure that new staff members and volunteers follow the protective measures you have in place to help prevent the transmission of coronavirus (COVID-19).

Staff who are clinically extremely vulnerable

Shielding advice was paused nationally at midnight on 31 March.

As of 1 April, CEV individuals are no longer advised to shield but must continue to follow the rules in place for everyone under the current national restrictions. In addition to the rules that everyone must follow, the government is advising CEV individuals to continue to take extra precautions to protect themselves and keep themselves safe.

Those living with someone who is CEV should attend work where home working is not possible, but should ensure they maintain good prevention practice in the workplace and home settings.

CEV individuals (over 18) have been prioritised for vaccination in phase 1 before the general population and in line with the priority ordering set by the Joint Committee on Vaccination and Immunisation.

Staff who are clinically vulnerable

Clinically vulnerable staff should continue to attend the setting where it is not possible to work from home. They should practise good hand and respiratory hygiene, minimise contact and maintain social distancing.

Those living with someone who is clinically vulnerable can attend the workplace but should ensure they maintain good prevention practice in the workplace and in home settings.

Pregnancy

You will need to follow the specific guidance for pregnant employees because pregnant women are considered clinically vulnerable. In some cases, pregnant women may also have other health conditions that mean they are considered CEV, where the advice for CEV individuals will apply. COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding contains vaccination advice.

Your workplace risk assessment should already consider any risks to female employees of childbearing age and, in particular, risks to new and expectant mothers. If you are notified that an employee is pregnant, breastfeeding, or has given birth within the last 6 months, you should check the workplace risk assessment to see if any new risks have arisen. An assessment may help identify any additional action that needs to be taken to mitigate risks.

Any risks identified at that point, or later during the pregnancy, in the first 6 months after birth, or while the employee is still breastfeeding, must be included and managed as part of the general workplace risk assessment. You must take appropriate sensible action to reduce, remove or control the risks.

As part of your risk assessment, you should consider whether adapting duties or facilitating home working may be appropriate to mitigate risks.

You should be aware that pregnant women from 28 weeks' gestation, or with underlying health conditions at any point of gestation, may be at greater risk of severe illness if they catch coronavirus (COVID-19). This is also the case for pregnant women with underlying health conditions that place them at greater risk of severe illness if they catch coronavirus (COVID-19).

Staff who may otherwise be at increased risk from coronavirus (COVID-19)

Current evidence shows that a range of factors mean that some people may be at comparatively increased risk from coronavirus (COVID-19). Where it is not possible to work from home, these staff can attend your setting as long as the system of controls set out in this guidance are in place. You should continue with an equitable approach to risk management for your workforce, recognising that staff may have a variety of baseline risks. Work continues to build our understanding of what these baseline factors are and the increased risks they pose.

There is further information available on who is at higher risk from coronavirus (COVID-19). Staff who live with those who may have comparatively increased risk from coronavirus (COVID-19) can attend the workplace where it is not possible to work from home.

Carrying out a risk assessment

There are important actions that you should take during the coronavirus (COVID-19) outbreak, to help prevent the transmission of the virus.

Providers have a legal duty to protect people from harm. This includes taking reasonable steps to protect staff, children and others attending your setting from coronavirus (COVID-19). You must comply with health and safety law.

We strongly recommend that you consult advice set out by the Health and Safety Executive on coronavirus (COVID-19), including:

- managing risks and risk assessment at work
- first aid at work
- first aid cover and qualifications during the coronavirus (COVID-19) pandemic

As part of your risk assessment, you should identify protective measures to put in place, such as those listed in the guidance on working safely during coronavirus (COVID-19). If you work in other people's homes, for example as a private tutor, you should follow the guidance on other people's homes - working safely during coronavirus (COVID-19).

You should also look at other disease transmission risks, such as the tendency for older children to mix with other community groups outside your setting or when using public transport to attend your setting.

In most cases, risk assessments and preparation for reopening or wider opening of out-of-school settings should be carried out by a senior member of staff. However, you should also work with other relevant parties, such as your staff members, the owner of the premises where your provision is being held, and your local authority, to identify the risks and determine protective measures to put in place. You will need to establish who is responsible for implementing each protective measure.

You should regularly review and update your risk assessments – treating them as 'living documents' – as the circumstances at your setting and the public health advice changes. This will be particularly relevant at each point you prepare to welcome back more children.

You should share any significant findings of the risk assessment with your staff and on your website if you have one.

You should, as a minimum, be able to explain to parents and carers the steps you are taking to reduce the health and safety risks in your setting and outline the protective measures you have in place. If parents and carers need to be aware of the protective measures put in place by the owner of the premises that you are operating out of, you should outline these to them or direct them to the relevant website.

Considering group sizes

Decisions on group sizes for your setting should be based on:

- whether the activity takes place indoors or outdoors
- the current government guidance on social distancing
- the ability of the children in attendance to maintain social distancing and practise hand hygiene
- the age of the children in attendance
- nature of your activity or provision (for example, static, classroom set-up rather than an activity that requires a range of movement)
- the size or layout of your premises
- the ability to ventilate your premises effectively with fresh air

Indoor provision

If you normally run sessions indoors, you should consider whether you can run them safely outside instead, as the risk of transmission is lower outdoors.

To reduce the risk of transmission, you should also aim to minimise mixing between children as far as possible. This can be achieved by keeping children in consistent groups or 'bubbles'. Therefore, where the activity is taking place indoors, you should first consider whether children can be kept in the same bubble as they are in during the school day in order to minimise mixing between different children. For more information, read the actions for schools during the coronavirus (COVID-19) outbreak.

Where it is not possible to group children in the same bubble as they are in during the school day, you should keep them in small groups of no more than 15 children and at least one staff member; and where possible, with the same children each time they attend. Further steps that can be taken to minimise the risk of mixing between children would include keeping children from the same school together, or working with parents and carers to keep siblings from the same household together.

Outdoor provision

All children can use outdoor provision regardless of circumstances or need. Additionally, if the activity is taking place outdoors, groups can be of any number. This is because the transmission risk is lower outside.

However, it remains important to minimise mixing between children. This can be achieved by taking steps to keep children in separate groups or 'bubbles'. For example, keeping children from the same school day bubble or school together, or working with parents and carers to keep siblings from the same household together.

Keeping children in smaller groups will also help to further minimise the risk of transmission. Where you are operating larger groups (for example, larger than 15) it will be even more important to implement these measures and try to keep children in consistent groups.

Reviewing groups

You should review groups to minimise the amount of 'mixing'. For example, when new children register for your provision, you should determine whether they attend the same school or early years setting as other children in your setting and group them together if appropriate.

To help you review your groups, you should keep up-to-date records of the children attending your setting for at least 21 days. These records should include the school or early years setting that they attend and the specific groups and members of staff they have been assigned to in your setting.

There may be instances where you cannot keep consistent groups, or you need to have smaller groups, because of:

- the premises not being large enough to ensure social distancing between groups
- the premises having insufficient safe ventilation capacity
- varying booking patterns
- additional bookings throughout the term and during school holidays
- safeguarding or welfare concerns
- children of different ages attending
- the 'drop in' nature of some services and activities, for example, support groups for vulnerable young people

Any decisions should be taken with full consideration of any welfare needs and safeguarding concerns.

Group sizes for children under 5

Providers caring for children:

- under 5 years only should refer to the guidance for early years and childcare providers during the coronavirus (COVID-19) outbreak
- both under 5 years and aged 5 years and over, in mixed groups together, should follow this guidance and keep children in small consistent groups. The section on considering group sizes contains more information.

Operating with multiple groups

When operating provision for multiple groups of children throughout the day, you should allow enough changeover time in between groups for cleaning, and to prevent children and parents or carers waiting in large groups. Multiple groups of 15 children (or more if the provision is outside) plus staff can use the same shared space if necessary, with distancing between the groups and adequate ventilation. Although, different groups sharing the same space should be avoided where possible.

If you operate in a space that is also used by other groups or organisations, such as a community centre, you should discuss the infection protection and control measures with the owner of the space. The owners of these shared spaces must continue to meet all existing health and safety obligations to ensure that their premises are safe for providers to hire and to operate from.

System of controls: infection protection and control

In this section, where something is essential for public health reasons, as advised by Public Health England (PHE), we have said 'must'. Where there is a legal requirement we have made that clear. This guidance does not create any new legal obligations.

This is the set of actions you must take. They are grouped into 'prevention' and 'response to any infection'. If you follow the system of controls, you will effectively reduce risks in your setting and create an inherently safer environment.

These additional measures will be reviewed in partnership with health experts to decide whether evidence suggests that these measures can be eased ahead of the summer.

Prevention

Providers (including their staff where applicable) must always:

1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend your setting.

2) Ensure face coverings are used in recommended circumstances.

3) Ensure everyone is advised to clean their hands thoroughly and more often than usual.

4) Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach.

5) Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents.

6) Consider how to minimise contact across the site and maintain social distancing wherever possible.

7) Keep occupied spaces well ventilated.

In specific circumstances:

8) Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary.

9) Promote and engage in asymptomatic testing, where available.

Response to any infection

Providers (including their staff where applicable) must always:

10) Promote and engage with the NHS Test and Trace process.

11) Manage and report confirmed cases of coronavirus (COVID-19) amongst the setting community.

12) Contain any outbreak by following local health protection team advice.

1. Minimise contact with individuals who are required to self-isolate by ensuring they do not attend your setting

When an individual develops coronavirus (COVID-19) symptoms or has a positive test

Children and young people, staff and other adults must not come into your setting if:

- they have one or more coronavirus (COVID-19) symptoms

- a member of their household (including someone in their support bubble or childcare bubble, if they have one) has coronavirus (COVID-19) symptoms
- they are legally required to quarantine, having recently visited countries outside the common travel area
- they have had a positive test

They must immediately cease to attend and not attend for at least 10 days from the day after:

- the start of their symptoms
- the test date if they did not have any symptoms but have had a positive LFD test (if a PCR test is then taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the child or staff member can return to the setting)

You must follow this process and ensure everyone onsite or visiting is aware of it.

Anyone told to isolate by NHS Test and Trace or by their public health protection team, has a legal obligation to self-isolate, but you may leave home to avoid injury or illness or to escape risk of harm. More information can be found on NHS Test and Trace: how it works.

If anyone in your setting develops a new and continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), you:

- must send them home to begin isolation - the isolation period includes the day the symptoms started and the next 10 full days
- advise them to follow the guidance for households with possible or confirmed coronavirus (COVID-19) infection
- advise them to arrange to have a test to see if they have coronavirus (COVID-19)

Other members of their household (including any siblings and members of their support or childcare bubble if they have one) should self-isolate. Their isolation period includes the day symptoms started for the first person in their household and the next 10 full days. If a member of the household starts to display symptoms while self-isolating, they will need to restart the 10-day isolation period and book a test.

If a child in your setting displays symptoms and is awaiting collection, they should:

- move to a well-ventilated room, if possible, where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision - a window should also be opened for ventilation if it is safe to do so
- stay at least 2 metres away from other people
- use a separate bathroom if possible, which must be cleaned and disinfected using standard cleaning products before being used by anyone else

PPE should be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained.

In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital, unless advised to. Further information is available on how to manage and report confirmed cases of coronavirus (COVID-19) amongst the out-of-school settings community.

When an individual has had close contact with someone with coronavirus (COVID-19) symptoms

Any member of staff who has provided close contact care to someone with symptoms, regardless of whether they are wearing PPE, and all other members of staff or children who have been in close contact with that person, do not need to go home to self-isolate unless:

- the symptomatic person subsequently tests positive
- they develop symptoms themselves (in which case, they should self-isolate immediately and arrange to have a test)
- they are requested to do so by NHS Test and Trace or the Public Health England (PHE) advice service (or PHE local health protection team if escalated), which is a legal obligation
- they have tested positive from an LFD test as part of a community or worker programme

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who has symptoms. The area around the person with symptoms must be cleaned after they have left, to reduce the risk of passing the infection on to other people. Read COVID-19: cleaning of non-healthcare settings guidance.

2. Ensure face coverings are used in recommended circumstances

Where there are children in year 7 (who were aged 11 on 31 August 2020) and above, we recommend that face coverings should be worn by children when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained.

In addition, we also recommend that in those settings, face coverings should be worn by adults and children in classrooms or during activities unless social distancing can be maintained. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example during sports. Face coverings do not need to be worn by children when outdoors on the premises.

Subject to the roadmap process, as part of step 3, we expect these precautionary measures to no longer be recommended. This would be no earlier than 17 May and will be confirmed with one week's notice.

In settings where children in year 7 and above are attending, we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing is not possible (for example when moving around in corridors and communal areas).

In settings where only children below year 7 are attending, we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). Children in primary school (or of equivalent age) should not wear face coverings.

The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who rely on visual signals for communication, or communicate with or provide support to such individuals, are currently exempt from any requirement to wear face coverings in schools or in public places.

Transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. There is currently very limited evidence regarding the effectiveness or safety of transparent face coverings, but they may be effective in reducing the spread of coronavirus (COVID-19).

Out-of-school settings should consider whether they can make reasonable adjustments for disabled children and young people, to support them to access activities successfully.

The following is a non-exhaustive list that provides examples of possible adjustments:

- the provision and effective use of assistive listening devices, such as radio aids.
- an increased focus on the listening environment, minimising all unnecessary background noise - steps should be taken so that children with hearing loss are taught in classrooms with the best possible listening conditions
- allowing the use of speech-recognition apps on mobile devices and tablets in classrooms, taking into account possible variations in the effectiveness of such apps in different classroom situations
- additional communication support, including remote speech-to-text reporters or sign language interpreters
- separate one-to-one teaching and support, without the use of face coverings and in rooms where social distancing can be achieved or through a Perspex panel

Where appropriate, out-of-school settings should discuss with children and young people and parents the types of reasonable adjustments that are being considered to support an individual.

Face visors or shields should not be worn as an alternative to face coverings. However, they can be worn by those exempt from wearing a face covering. They may protect against droplet spread in specific circumstances but are unlikely to be effective in reducing aerosol transmission when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately.

Exemptions

Where face coverings are recommended there are some circumstances where people may not be able to wear a face covering.

This includes (but is not limited to):

- people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability
- where putting on, wearing or removing a face covering will cause you severe distress
- if you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate
- to avoid harm or injury, or the risk of harm or injury, to yourself or others – including if it would negatively impact on your ability to exercise or participate in a strenuous activity

The same exemptions will apply in education and childcare settings and you should be sensitive to those needs, noting that some people are less able to wear face coverings and that the reasons for this may not be visible to others.

Access to face coverings

Due to the increasing use of face coverings in wider society, staff and children and young people are already likely to have access to face coverings. PHE has also published guidance on how to make a simple face covering. You should have a small contingency supply available for people who:

- are struggling to access a face covering
- are unable to use their face covering as it has become damp, soiled or unsafe
- have forgotten their face covering

Safe wearing and removal of face coverings

You should have a process for when face coverings are worn within your setting and how they should be removed. You should communicate this process clearly to children and young people, staff and visitors and allow for adjustments to be made for children and young people with SEND who may be distressed if required to remove a face covering against their wishes. Safe wearing of face coverings requires the:

- cleaning of hands before and after touching – including to remove or put them on
- safe storage of them in individual, sealable plastic bags between use

Where a face covering becomes damp, it should not be worn, and the face covering should be replaced carefully. Staff and children and young people may consider bringing a spare face covering to wear if their face covering becomes damp during the day.

You must instruct children and young people to:

- not touch the front of their face covering during use or when removing it
- dispose of temporary face coverings in a 'black bag' waste bin (not recycling bin)
- place reusable face coverings in a plastic bag they can take home with them
- wash their hands again before heading to their classroom or activity room

3. Ensure everyone is advised to clean their hands thoroughly and more often than usual

Coronavirus (COVID-19) is an easy virus to kill when it is on skin. This can be done with soap and water or hand sanitiser. You must ensure that children clean their hands regularly, including:

- when they arrive at your setting
- when they return from breaks
- when they change rooms
- before and after eating

Consider how often children and staff will need to wash their hands and incorporate time in for this. Staff working with children who spit uncontrollably may want more opportunities to wash their hands than other staff. Children who use saliva as a sensory stimulant or who struggle with 'catch it, bin it, kill it' may also need more opportunities to wash their hands.

Continue to help children with complex needs to clean their hands properly.

Frequent and thorough hand cleaning should now be regular practice. You should consider:

- whether you have enough hand washing or hand sanitiser stations available so that all children and staff can clean their hands regularly
- if you need to supervise hand sanitiser use given the risks around ingestion – skin friendly skin cleaning wipes can be used as an alternative
- building these routines into your setting's culture, supported by behaviour expectations and helping ensure younger pupils and those with complex needs understand the need to follow them

4. Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach

The 'catch it, bin it, kill it' approach continues to be very important. Make sure enough tissues and bins are available to support children and staff to follow this routine. As with hand cleaning, you must ensure younger children and those with complex needs are helped to get this right, and all pupils understand that this is now part of how the setting operates. The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage good hand and respiratory hygiene.

Some children with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these children and the staff working with them and is not a reason to deny these children a place at your setting.

5. Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products, such as detergents

In line with the risk assessment and timetabling of activities in your setting, put in place and maintain an enhanced cleaning schedule. This should include:

- more frequent cleaning of rooms or shared areas that are used by different groups
- frequently touched surfaces being cleaned more often than normal
- cleaning toilets regularly
- encouraging children to wash their hands thoroughly after using the toilet
- if your site allows it, allocating different groups their own toilet blocks

PHE has published guidance for cleaning non-healthcare settings. This contains advice on the general cleaning required in addition to the existing advice on cleaning when there is a suspected case.

6. Consider how to minimise contact and maintain social distancing across the site wherever possible

Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts, and you must consider how to implement this.

The overarching principle to apply is reducing the number of contacts between children and staff. This can be achieved through keeping groups separate and consistent - read the section considering group sizes - and through maintaining distance between individuals.

You should encourage children and young people to maintain social distancing as far as possible. This should also be observed by staff members and parents and carers at pick up and drop off.

Staff members and children and young people within the setting, should also maintain social distancing as far as possible.

There will be some situations where social distancing is not possible, for example between younger children or in outdoor sports and activities. Therefore it is important that the other protective measures outlined in this guidance are implemented.

7. Keep occupied spaces well ventilated

Good ventilation reduces the concentration of the virus in the air, which reduces the risks from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied an enclosed area.

When your setting is in operation, it is important to ensure it is well ventilated and a comfortable childcare or teaching environment is maintained. These can be achieved by a variety of measures including:

- mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible, and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply)
- natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air
- natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)

The Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus (COVID-19) outbreak and CIBSE Coronavirus (COVID-19) Advice provides more information.

To balance the need for increased ventilation while maintaining a comfortable temperature, consider:

- opening high level windows in colder weather in preference to low level to reduce draughts
- increasing the ventilation while spaces are unoccupied
- providing flexibility to allow additional, suitable indoor clothing
- rearranging furniture where possible to avoid direct draughts

Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.

8. Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary

Most staff in out-of-school settings will not require PPE beyond what they would normally need for their work. Face coverings are not classified as PPE (personal protective equipment).

PPE is only needed in a very small number of cases, for example:

- children, young people and learners whose care routinely already involves the use of PPE
- if a distance of 2 metres cannot be maintained from any child, young person or other learner displaying coronavirus (COVID-19) symptoms

More information on the use of PPE is available in the guidance on safe working in education, childcare and children's social care settings.

Providers should use their local supply chains to obtain required PPE. They may also be able to source PPE and cleaning products through the Crown Commercial Service (CCS) 'Safer Working Supplies' Portal. In addition, public sector buying organisations have pre-existing experience and relationships across our sector. Some of these organisations have e-catalogues offering PPE and cleaning products, including:

- ESPO
- YPO
- NEPO

9. Promote and engage in asymptomatic testing, where available

Asymptomatic testing will help to break the chains of transmission of coronavirus (COVID-19) in education and childcare settings by identifying asymptomatic positive cases. This is important as up to 1 in 3 people who have the virus have it without symptoms (they are asymptomatic) so could be spreading the disease unknowingly. Staff who test positive then self-isolate, helping to reduce transmission of the virus.

Primary, school-based nursery and maintained nursery staff have been supplied with lateral flow device (LFD) test kits to self-swab.

For secondary schools, we are moving to a home testing model. The lateral flow devices (LFDs) used have received regulatory approval from the MHRA for self-use. Home test kits will be available for all staff on return.

Staff or children with a positive LFD test result must self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result. If the PCR test is taken within 2 days of the positive lateral flow test and is negative, it overrides the self-test LFD and the child or staff member can return to the education or childcare setting. Those with a negative LFD test result can also continue to attend education and childcare settings and use protective measures.

More information can be found in:

- schools coronavirus (COVID-19) operational guidance
- coronavirus (COVID-19) asymptomatic testing in schools and colleges
- rapid asymptomatic coronavirus (COVID-19) testing for staff in primary schools, school-based nurseries and maintained nursery schools
- rapid asymptomatic coronavirus (COVID-19) testing in early years settings

If you are operating on or linked to, a school, including maintained nursery sites, then you should discuss with that school or nursery how your staff can access regular asymptomatic testing. Schools and nurseries should offer testing to all staff who are working in their settings including contractors or peripatetic staff. They should also offer testing to those supporting with wraparound childcare to children currently attending school, as well as other staff members such as clinical practitioners, therapists, other support staff, caterers and volunteers.

As critical workers, staff working in wraparound childcare and out-of-school settings, including those not operating on school sites, are being prioritised for asymptomatic testing through local community testing programmes. More information is available at find out if your area offers rapid lateral flow test sites.

As of 22 March, asymptomatic testing has been expanded to provide more options to those who work in occupations related to childcare provision, schools, nurseries or colleges, as well as their household, childcare and support bubbles. This expansion helps those in related occupations, such as wraparound childcare providers (including those in out-of-school settings), access twice-weekly asymptomatic testing by any of the following:

- attend a test site to take a test or pick up tests to do at home - find your nearest test site via the postcode checker or check your local council website
- attend a collection site to collect tests to do at home - find your nearest collection site online
- order a test online

The asymptomatictesting programmedoes not replace the current testing policy for those with symptoms. Anyone with symptoms (even if they recently had a negative LFD test result), should still self-isolate immediately according to government guidelines and get a PCR test as soon as possible.

System of controls - response to any infection

10. Promote and engage with the NHS Test and Trace process

The NHS Test and Trace service will help to manage the risk of the virus re-emerging as restrictions on everyday life are eased.

Anyone contacted by NHS Test and Trace and told to self-isolate has a legal obligation to do so, but they may leave home to avoid injury or illness or to escape risk of harm. More information can be found on NHS Test and Trace: how it works.

Staff members, parents and carers will need to:

- book a test if they or their child has symptoms - the main symptoms are:
  - a high temperature
  - a new continuous cough
  - a loss or change to your sense of smell or taste
- self-isolate immediately and not come to your setting if:
  - they develop symptoms
  - they have been in close contact with someone who tests positive for coronavirus (COVID-19)
  - anyone in their household or support or childcare bubble develops symptoms of coronavirus (COVID-19)
  - they are required to quarantine having recently visited countries outside the common travel area
  - they have been notified by NHS test and trace or the PHE local health protection team that they have tested positive
  - provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace

Polymerase chain reaction tests (PCR) for symptomatic testing

Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests for symptomatic illness can be booked online through the NHS testing and tracing for coronavirus (COVID-19) website, or ordered by telephone via NHS 119 for those without access to the internet.

Critical workers, which includes anyone involved in education or childcare, have priority access to testing. All children and young people can be tested if they have symptoms. This includes children under 5, but children aged 11 and under will need to be helped by their parents or carers if using a home testing kit.

Use of the NHS COVID-19 app

Please refer to the guidance on the use of the app in schools and further education colleges for more information. The app is available to download for anyone aged 16 and over.

Test and Trace support payments

Individuals who are self-isolating and are unable to work from home may lose income as a result. These individuals may be entitled to a Test and Trace support payment of £500, payable as a lump sum from local authorities.

To be eligible for a Test and Trace support payment, the individual must be living in England, meet the eligibility criteria and be formally advised to self-isolate by NHS Test and Trace, who will provide them with an NHS Test and Trace Account ID.

More information about applying for a Test and Trace Support Payment is available.

11. Manage confirmed cases of coronavirus (COVID-19) amongst the setting community

You must take swift action when you become aware that someone who has attended has tested positive for coronavirus (COVID-19).

If they test positive, NHS Test and Trace will speak directly to those they have been in contact with. This may mean that the rest of their group or bubble will be required to self-isolate. If this is the case, they will be advised to self-isolate immediately and for at least the next 10 full days counting from the day after contact with the individual who tested positive. It is a legal requirement for an individual to self-isolate if they have been told to do so by NHS Test and Trace.

To support NHS Test and Trace in reaching close contacts, you should keep a record of:

- close contact between children and staff in specific groups or rooms
- the timing of the activities and interactions

Records should be kept for 21 days.

You should also inform your local authority of a positive case in your setting. Where more detailed local arrangements are in place with the local authority, and are working, your setting can continue to receive support through that route to take action in response to a positive case.

Household members of those contacts who are sent home do not need to self-isolate themselves unless the pupil or staff member who is self-isolating subsequently develops symptoms, or they have been told to self-isolate by NHS Test and Trace, in which case they must self-isolate - this is a legal obligation. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within the 10 days from the day after contact with the individual who tested positive, they should follow guidance for households with possible or confirmed coronavirus (COVID-19) infection.

You should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.

If a child, young person or staff member develops coronavirus (COVID-19) symptoms but tests negative, they can return to your setting. If they remain unwell, they should not return until they have recovered.

12. Contain any outbreak by following PHE local health protection team advice

If you have 2 or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, you may have an outbreak.

You should work with your local health protection team who will be able to advise if additional action is required.

In some cases, health protection teams may recommend that a larger number of other children self-isolate at home as a precautionary measure. This could be the whole site or bubble.

If you are implementing the protective measures in this guidance, addressing any issues you have identified and therefore reducing transmission risks, whole site closure will not generally be necessary. You should not consider closing except on the advice of health protection teams.

Safety measures for activities in out-of-school settings

Sports provision

All outdoor sports provision can be accessed by all children without restriction on the purposes for which they may attend. However, restrictions on access to indoor provision will remain in place until 12 April. Read the sections who can attend your out-of-school setting and considering group sizes for more information.

Care should be taken to maintain social distancing in a sports setting as people breathe more heavily and rapidly during exercise. Outdoor sports should be prioritised where possible, and large indoor spaces used where it is not, maximising natural ventilation flows (though opening windows and doors or using air conditioning systems wherever possible), distancing between children, and paying scrupulous attention to cleaning and hygiene.

Where you are considering team sports you should only engage in those sports whose national governing bodies have developed guidance under the principles of the government's guidance on team sport, and been approved by the government, for example, sports on the list available at grassroots sports guidance for safe provision including team sport, contact combat sport and organised sports events.

Read the providers of grassroots sport and sport facilities guidance for more information. Providers of sports activities should also refer to relevant guidance from:

- Sport England
- Association for Physical Education
- Youth Sport Trust

Music, dance and drama provision

Teaching music, dance and drama, can be particularly valuable for supporting children's wellbeing, and helping them to build more self-confidence.

Music lessons in private homes can take place, following the protective measures in this guidance, and additionally following the government guidance for working in homes. However, there may be an additional risk of infection in environments where singing, chanting, playing wind or brass instruments, dance or drama take place. There is now some evidence that additional risk can build from aerosol transmission with volume and, in particular, with the combined numbers of individuals within a confined space. This is particularly evident for singing and shouting.

When planning this provision, you should therefore consider additional safety measures; and should ensure you follow the measures in this guidance and read the guidance on working safely in performing arts to reduce any risks of aerosol transmission.

Minimising contact between individuals

You should take particular care in music, dance and drama activities to observe social distancing where possible. This may mean you need to have groups smaller than 15 when indoors. It will also prevent physical correction by teachers and contact between children and young people in dance and drama.

Measures you can take to reduce the risk of transmission and infection during these activities include:

- limiting the number of children singing or playing
- ensuring children are in groups of no more than 15 if they are indoors, if the activity is taking place outdoors, this can happen in groups of any number
- making sure children are socially distanced at all times (2 metres apart), are outside or in a well-ventilated room
- activities which can create aerosol are discouraged, such as shouting or singing loudly
- keep any background or accompanying music to levels which do not encourage teachers or other performers to raise their voices unduly

When children are singing or playing wind or brass instruments, you should also ensure:

- children sit down where possible to help maintain social distancing

- back-to-back or side-to-side positioning (rather than face-to-face) is used whenever possible, to ensure for example, air from instruments does not blow on to another player
- use microphones where possible or encourage children to sing quietly - if possible, do not share microphones; if they are shared, follow the guidance on handling equipment and instruments
- if indoors, use a room with as much space as possible, for example, larger rooms; rooms with high ceilings are expected to enable dilution of aerosol transmission
- limit the number of children to maintain social distancing and increase space ventilation.
- improve ventilation whenever possible, through the use of mechanical systems or opening windows and doors
- limit the length of activity as far as possible, considering the need for breaks

Performances

Providers should not host performances with an audience. The intention is that this will be permitted from step 3 of the roadmap (no earlier than 17 May). This is subject to review and further guidance will be provided in advance of step 3.

Educational visits and trips

The government's roadmap is driven by data, not dates. The government will only move from one step to the next when it is safe to do so based on 4 tests set out in the COVID-19 response - spring 2021.

Educational day visits

Schools and out-of-school settings can resume educational day visits from 12 April.

Any educational day visits must be conducted in line with relevant COVID-19 secure guidelines and the regulations in place at the time, including protective measures, such as keeping children within their consistent groups, and the COVID-19 secure measures in place at the destination.

Out-of-school settings should undertake full and thorough risk assessments in relation to all educational visits to ensure they can be undertaken safely. As part of this risk assessment, out-of-school settings will need to consider what control measures need to be used and ensure they are aware of wider advice on visiting indoor and outdoor venues.

Domestic residential educational visits

We continue to advise out-of-school settings and wraparound childcare providers (such as supplementary schools, holiday clubs and out-of-school extra-curricular clubs) against undertaking residential educational visits. This is due to the increased risk of transmission of coronavirus (COVID-19) when people are in indoor spaces for prolonged periods of time, such as when sharing accommodation overnight, coupled with the potential for children from different schools and school day bubbles to mix within these settings. We are currently reviewing the timing of the resumption of residential visits for out-of-school settings and further advice will be published as soon as possible.

In line with the roadmap, the department is also advising schools against domestic residential educational visits until step 3, no earlier than 17 May. Schools have been advised that the roadmap is driven by data not dates. The approach to domestic residential educational visits is dependent on the roadmap and is subject to change.

When domestic residential educational visits for schools are permitted, schools may use out-of-school settings, such as outdoor education centres, to undertake these visits. Further detailed guidance on how to resume residential provision for school visits will be published in due course.

International visits

The Global Travel Taskforce has been commissioned to set out how to facilitate a return to international travel as soon as possible while managing the risk from imported Variants of Concern. It is due to report on 12 April 2021. This advice will be updated following the publication of the report.

Use of shared equipment

Equipment and resources are integral to many different out-of-school activities. For frequently used resources, such as pens and pencils, we recommend that staff, children and young people should have their own. Classroom based resources, such as books and games, can be used and shared within groups.

Equipment that is shared between groups, such as sports or art equipment, should either be:

- cleaned frequently and in between use by different groups
- rotated to allow it to be left unused for 48 hours (72 hours for plastics) between use by different groups

Outdoor playground equipment should be cleaned more frequently than usual, and where possible, between use by different groups of children.

Children and young people should only bring essential items into your setting. Bags should be allowed.

Children, young people and staff need not be forbidden to take books and other shared resources home, although unnecessary sharing should be avoided. The same rules on cleaning and rotation should apply to these resources.

Managing toilet use

When managing toilet use you should:

- consider how to limit the number of children using the toilet at any one time
- encourage children to wash their hands thoroughly, with soap and water for 20 seconds, after using the toilet
- consider allocating groups their own toilet blocks, but only if the site allows it

Toilets should be cleaned thoroughly using detergent and bleach. The frequency of cleaning required will depend on usage, however we expect toilet facilities to be cleaned at least twice a day, and in between use by different groups.

The guidance on cleaning of non-healthcare settings outside the home provides general advice about the cleaning of facilities, as well as advice for the cleaning of facilities if they have been used by someone suspected of having, or confirmed to have coronavirus (COVID-19).

Communicating with staff and parents or carers

Please ensure you read and implement the guidance on working safely during coronavirus (COVID-19). Talk to staff about your safety measures and discuss whether specific training would be helpful. You should also arrange regular opportunities to get feedback from staff on these safety measures.

If you employ cleaning staff, you should tell them about the extra cleaning requirements and agree additional hours to allow for this.

The actions for schools during the coronavirus (COVID-19) outbreak includes information for staff that you may be able to apply to your own setting.

When communicating with parents and carers about safety measures, you should:

- make clear to parents and carers which children are eligible to attend for which purposes - read the section on who can attend your out-of-school setting
- advise parents and carers that they should be limiting their use of multiple out-of-school settings, and should as far as possible only be sending their children to one out-of-school setting, in addition to school, in order to minimise mixing
- encourage parents and carers to avoid public transport to get to your setting - where possible, encourage them to have their child walk or cycle to the setting, or have them dropped off by a member of their household in a private car
- ensure they know the process for pick-up and drop-offs, for example, which entrance to use or limiting drop off and pick up to one parent or carer per family and staggering timings

Try to avoid the need for parents and carers to wait if possible, but where they have to, consider whether distancing markings can be used and make clear they cannot gather at entrance gates or doors.

Safeguarding and wellbeing

Safeguarding and child protection

The coronavirus (COVID-19) outbreak may have caused significant mental health or wellbeing difficulties for some children and they may be at increased risk of harm or abuse. Due to the current circumstances, vulnerable children may be particularly isolated, meaning that the family, community and professional networks they usually rely on may be unavailable or hard to access.

It is important that you and your staff are aware of safeguarding issues and the signs to look out for. Further information is available in the guidance for keeping children safe during community activities, after-school clubs and tuition.

Supporting children and young people's wellbeing

You and your staff may also need to consider how to support:

- children and young people who have found the long period at home hard to manage
- those who have developed anxieties relating to the coronavirus (COVID-19)

Some children may have experienced bereavements in their family or wider circle of friends, or may have increased or new caring responsibilities. As part of your provision, you may wish to provide:

- opportunities for children to talk about their experiences of the past few months
- opportunities for conversations with trusted adults
- lessons on relevant topics, for example, mental wellbeing and staying safe

Equality

It is important that you create spaces, services and opportunities that enable everyone to engage equally.

This may require adjustments to ensure that everyone benefits fairly. Your equality and diversity policy should be considered at all times, especially when making decisions and judgements related to the impact on individuals and groups with different protected characteristics.

When applying this guidance, consider the particular needs of different groups of workers and individuals. You should be aware that some parents and carers may look to holiday clubs and out-of-school settings to offer respite childcare for children with special educational needs or with an education, health and care plan (EHCP). Parents or carers of disabled children may continue to access respite care to support them in caring for their disabled child. Further information on this is available in the guidance for children's social care services.

Providers are permitted to open for disabled children[footnote 1] who are accessing these services as a local authority funded short break or as respite care, and ensuring that provision is available and accessible to these children, as far as possible, should remain a priority in these current circumstances.

Local authorities will need to work with their short breaks/ respite care provider base to ensure children can attend services (and to ensure that these can operate during the school holidays, as this can be a key pressure point for families with caring responsibilities). For example, some local authorities have made more use of direct payments beyond their usual criteria.

It is against the law to discriminate, directly or indirectly, against anyone in employment and in the provision of services because of a protected characteristic, such as age, sex, race or disability.

Employers and organisations (voluntary or otherwise) also have additional responsibilities towards disabled individuals and those who are new or expectant mothers.

There is evidence that black, Asian and minority ethnic (BAME) individuals may be more severely affected by coronavirus (COVID-19). You should be especially sensitive to the needs and worries of BAME children and young people, parents and carers, and staff. Interventions in the work setting to manage risk should be carefully and appropriately communicated.

Annex A: resources to help children learn about coronavirus and how to keep themselves and others safe

The following links may be helpful in supporting the children that attend your setting to learn about coronavirus (COVID-19) and promote safety measures:

e-Bug has produced a series of helpful coronavirus (COVID-19) posters:

- Horrid hands
- Super sneezes
- Hand hygiene
- Respiratory hygiene
- Microbe mania
- Busy Bees handwashing song

Other resources you may find useful are:

- Professional association for children and early years (PACEY): supporting children in your setting
- Dr Dog explains coronavirus
- Bright Horizons: Talking to Children about COVID-19 (novel coronavirus)

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1. If a child meets the definition of a disabled child within the meaning of s.17(11) of the Children Act 1989, the local authority must provide short break services to the individuals who provide care for such children under paragraph 6 of Schedule 2 of the Children Act 1989. If a child with SEND does not meet the s.17(11) definition, the local authority can carry out an assessment of the child's needs and offer short break services if appropriate under s.17 (1). ↩

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