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Department for Education

Guidance

# Actions for early years and childcare providers during the coronavirus (COVID-19) outbreak

Updated 13 April 2021

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## Main changes to previous guidance

On 13 April 2021, we updated the following sections:

- face coverings - visual communication, visors and exemptions

We also updated the following sections to reflect step 2 of the roadmap out of lockdown:

- parent and child groups - singing
- clinically extremely vulnerable staff
- clinically extremely vulnerable children
- educational trips

## Who this guidance is for

This guidance is for local authorities and all early years providers in England. This includes early years provision in:

- maintained schools
- non-maintained schools
- independent schools
- all providers on the Ofsted early years register
- all providers registered with an early years childminder agency

For reception year groups, schools should, in the most part, refer to actions for schools during the coronavirus outbreak although some of the information in this guidance is relevant to reception.

This guidance does not apply to:

- nannies or au pairs, as they work in the child's or children's family home
- providers caring for children over the age of 5 and registered with Ofsted on either the compulsory or voluntary childcare register – providers caring for children over the age of 5 should refer to the guidance on protective measures for holiday and after-school clubs, and other out-of-school settings during the coronavirus (COVID-19) outbreak

- providers offering childcare through community activities, holiday clubs, breakfast or after-school clubs, tuition and other out-of-school provision, should refer to protective measures for holiday and after-school clubs, and other out-of-school settings during the coronavirus (COVID-19) outbreak

# Introduction

This guidance is provided to support early years settings to manage provision during coronavirus (COVID-19). Early years registered nurseries, pre-schools, childminders, maintained nursery schools, nursery classes in schools, and other pre-reception provision on school sites should remain open to allow all children to attend full time or their usual hours.

The system of controls in this guidance create an environment for children and staff where the risk of transmission of infection is substantially reduced. Settings will need to continue to implement these controls to the fullest extent possible.

We continue to work with the early years sector to understand how they can best be supported to ensure that sufficient, safe, appropriate and affordable childcare is available for those who need it now, and for all families who need it in the longer term.

## Contingency framework

You should continue to operate as normally as possible during the coronavirus (COVID-19) pandemic. If restrictions in early years settings are needed to help contain the spread of the virus, then you may be asked to revise your delivery models for a short period of time. To help with this, we have published a contingency framework and guidance on vulnerable children and critical worker children.

Any decisions on local restrictions in any childcare or education settings will be made by central government.

# Other guidance available

## Infection prevention and control

- safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) - GOV.UK (www.gov.uk)

## Self-isolating

- if you need to self-isolate or cannot attend work due to coronavirus
- what to do if you're employed and cannot work
- stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection
- guidance for contacts of people with confirmed coronavirus (COVID-19) infection who do not live with the person

## Funding

- financial support for education, early years and children's social care
- use of free early education entitlements funding during coronavirus (COVID-19)
- 30 hours free childcare
- tax-free childcare

### Coronavirus job retention scheme

- check if you can claim for your employees' wages through the Coronavirus Job Retention Scheme
- furlough scheme extended and further economic support announced
- claim for wages through the Coronavirus Job Retention Scheme
- coronavirus Job Retention Scheme (CJRS) – a step by step guide for employers

### Other business support

- coronavirus (COVID-19): financial support for education, early years and children's social care
- self-employment Income Support Scheme
- business rates: nursery (childcare) discount 2020 to 2021: coronavirus response – local authority guidance)
- apply for the Coronavirus Business Interruption Loan Scheme
- check if you're eligible for the coronavirus Local Restrictions Support Grant (for open businesses) Business Insurance ABI

### EYFS disapplications and reforms

- temporary early years foundation stage (EYFS) coronavirus (COVID-19) disapplications EYFSreforms: government consultation response

### Ofsted

- Ofsted's response to coronavirus (COVID-19)

## Responsibilities of early years providers and local authorities

### Early years providers' responsibilities

We understand that it may not be possible for all settings to be open at this time. You should work together flexibly with other settings and local authorities to agree the provision needed locally to support the needs identified. Settings are responsible for:

- safeguarding - local agencies, services and settings should work together to actively look for signs of harm given the greater risk of harm that some children may have been exposed to through coronavirus (COVID-19)
- supporting the learning and development of, and caring for, children who attend, as set out in the early years foundation stage (EYFS) statutory framework
- in the case of vulnerable children, particularly those with social workers, early years providers should continue to encourage these children to attend regularly and notify their social worker if they stop attending
- planning and implementing the system of controls, building on the hierarchy of protective measures that have been in use throughout coronavirus (COVID-19)

Where early years settings are also caring for children over the age of 5, they should ensure they are also following guidance on protective measures for holiday and after-school clubs, and other out-of-school settings during the coronavirus (COVID-19) outbreak.

### Local authorities' responsibilities

Local authorities are responsible for:

- monitoring demand and capacity for childcare and should work with early years settings to ensure there are sufficient places to cater for those in priority groups as well as meeting local need – this may involve providing places in alternative settings if necessary or working with neighbouring local authorities to co-ordinate provision, while keeping in mind the impact on children and families
- continuing to safeguard and promote the welfare of all children in their area, working with partner organisations and agencies, throughout coronavirus (COVID-19) (as set out in working together to safeguard children)
- supporting early years settings to assess the risks for children whose education, health and care (EHC) plans they maintain, and ensuring those children are safely cared for whether in a setting or at home
- working together with local agencies and services to actively look for signs of harm given the greater risk of harm some children may have been exposed to through the coronavirus (COVID-19) period

### Ensuring sufficient places when settings have to close or have low-capacity or demand

We understand some settings may be unable to open, especially if they are experiencing staff shortages due to self-isolation and sickness, or particularly low levels of demand. Local authorities will work with local settings to determine the best way to ensure sufficient childcare.

### Actions for local authorities to monitor and manage their local early years markets

Local authorities should:

- continue to work with early years providers to monitor and manage their local childcare market
- develop an understanding of any gaps in childcare supply, as well as the barriers individual providers are experiencing and where they might temporarily be unable to open more widely or re-open (if they have been closed)
- where needed, manage the wider market flexibly to ensure that there is sufficient childcare provision and continuing to prioritise places for vulnerable children and children of critical workers, followed by 3 and 4 year olds, and then younger age groups

This may include:

- moving children between providers where one provider has closed, and another has available dedicated schools grant (DSG) funded places
- operating through clusters and hubs to maintain educational provision, or
- if necessary, considering whether to use early years DSG block contingency budgets, where local authorities have them, or uncommitted central spend in the early years budget

## Workforce

Setting leaders are best placed to determine the workforce that is required in their settings, taking into account the advice set out in this section of the guidance for those staff who are clinically extremely vulnerable (CEV).

All staff should follow the system of controls to minimise the risks of transmission. Following the system of controls will reduce the risks to all staff significantly.

Some roles, such as some administrative roles, may be conducive to home working, and you should consider what is feasible and appropriate.

You should explain to staff the measures you are putting in place to reduce risks and discuss any concerns individuals may have.

### Employer health and safety and equalities duties

Employers have a legal obligation to protect their employees, and others, including children, from harm. Employers should continue to assess and update health and safety risks and consider how to meet equalities duties in the usual way, especially in light of any changing circumstances. Following the system of controls will help:

- mitigate the risks of coronavirus (COVID-19) to children and staff
- meet their legal duties to protect employees and others from harm

The Health and Safety Executive published guidance on first aid during coronavirus (COVID-19) which:

- supports local risk assessments
- provides guidance for first aiders

## Supporting staff wellbeing

All employers have a duty of care to their employees and this extends to their mental health.

You should already have mechanisms to support staff wellbeing, and these will be particularly important, as some staff may be particularly anxious about attending the setting.

Education Support provides targeted support for mental health and wellbeing.

## Supporting people who maybe at increased risk from coronavirus (COVID-19)

### Staff who are clinically extremely vulnerable

Shielding advice has been paused nationally from 31 March 2021. Clinically extremely vulnerable (CEV) people are no longer advised to shield but must continue to follow the rules in place for everyone under the current national restrictions. Staff in settings who are CEV are advised to continue to work from home where possible, but if they cannot work from home they should attend their workplace.

Adults should maintain a 2-metre distance from others. Where this is not possible, they should avoid close face-to-face contact and minimise time spent within 1 metre of others. While the risk of transmission between young children and adults is likely to be low, adults should continue to take care to socially distance from other adults including older children and adolescents.

CEV individuals (aged 18 years and over) 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 (CV) staff can continue to attend early years settings. While in settings they must follow the system of controls to minimise the risks of transmission.

Staff who live with those who are CV can attend the workplace but should ensure they maintain good prevention practice in the workplace and at home.

Adults should maintain a 2-metre distance from others. Where this is not possible, they should avoid close face-to-face contact and minimise time spent within 1 metre of others. While the risk of transmission between young children and adults is likely to be low, adults should continue to take care to socially distance from other adults including older children and adolescents.

### Staff who are pregnant

You will need to follow the specific guidance for pregnant employees because pregnant women are considered CV. In some cases, pregnant women may also have other health conditions that mean they are considered CEV, where the advice for clinically extremely vulnerable staff 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 and/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).

More guidance and advice is available in coronavirus infection and pregnancy from the Royal College of Gynaecologists.

**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).

For others who feel they may be at increased risk, where it is not possible to work from home, these staff can attend settings 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.

## Staff shortages due to sickness or self-isolation

Settings that are experiencing staff shortages should:

- work with their local authority to identify how appropriate provision can be put in place while keeping staffing arrangements as consistent as possible
- where necessary, pool staff with another setting or take on qualified and Disclosure and Barring Service (DBS) checked staff from other educational settings (including local registered childminders) which have been closed, or invite local registered childminders to work with them at the setting - registered childminders can already do this under the 50 / 50 registration flexibility they have
- wherever possible, ensure staffing arrangements are consistent on a weekly basis, rather than a daily basis, in order to limit contacts

## Staff needing to quarantine

There is a risk that where staff travel abroad, their return travel arrangements could be disrupted due to coronavirus (COVID-19) restrictions and they may need to quarantine on their return. Guidance is available on how to quarantine when you arrive in England.

## Recruitment

Recruitment should continue as usual. You should consider a flexible approach to interviews, with alternative options to face-to-face interviews offered where possible.

Where face-to-face meetings are necessary, you should share the setting's control measures in advance and make it clear to candidates that they must follow the system of controls that you have in place. This includes any requirements for wearing face coverings where social distancing cannot be managed safely.

When recruiting, you must continue to adhere to the legal requirements regarding pre-appointment checks.

## Agency, peripatetic, students and other temporary staff

You can continue to use agency, peripatetic and other temporary staff, including students, and they can move between settings. All temporary and regular staff and visitors should follow the arrangements for managing and minimising risk based on the system of controls. They should also have access to information on the safety arrangements and be provided with this as soon as possible after the booking.

You can work with external coaches, clubs and organisations for curricular and extra-curricular activities. You should be satisfied that it is safe to do.

To help minimise the numbers of temporary staff entering the setting, you should consider:

- using longer assignments with agency staff
- agreeing to a minimum number of hours across the academic year

This also applies to other temporary staff such as:

- support staff working on an agency basis
- peripatetic staff such as music tutors and sports coaches
- those working in before- and after- school clubs and extra-curricular activities

## Volunteers

Volunteers may be used to support the work of the setting, as would usually be the case. It is important that they are properly supported and given appropriate roles.

Where you are using volunteers, continue to follow the appropriate safeguarding checks and risk assessment process. Under no circumstances should a volunteer who has not been appropriately checked and risk assessed be left unsupervised or allowed to work in regulated activity.

Mixing of volunteers across groups should be kept to a minimum, and they should adhere to the system of controls in place.

## Student placements

Students completing level 2, level 3 qualifications, including the T level in Education and Childcare, and early years initial teacher training (EYITT) trainees, are included in the definition of critical workers. Students and trainees can continue to go into their early years setting on placement.

We encourage you to find ways to continue hosting students completing Level 2 and Level 3 qualifications, including Education and Childcare T level learners, and EYITT trainees that require a placement. This is to protect the pipeline of future early years staff. Trainees and students should follow the system of controls put in place by early years settings.

### Support for placements

Private, voluntary or independent settings which offer placements may be able to apply for a financial incentive worth £1,000 to help with the cost of the placement until 31 July 2021 (this does not include T level placements). Maintained settings should contact their local authority to check whether they are eligible to apply for the incentive.

Find out more from the traineeship employer incentive registration form.

# Risk assessments

Employers have a legal duty to protect people from harm. This includes taking reasonable steps to protect staff, children and others from coronavirus (COVID-19) within the setting.

You should implement sensible and proportionate control measures which follow the health and safety hierarchy of controls to reduce the risk to the lowest reasonably practicable level. This hierarchy of controls is set out in Annex A: health and safety risk assessment).

You must regularly review and update your risk assessments – treating them as 'living documents' – as the circumstances at the setting and the public health advice changes. This includes having active arrangements in place to monitor that the controls are:

- effective
- working as planned

You must notify your staff and their health and safety representatives of review outcomes.

When conducting risk assessments, you should ensure consideration is given to staff and children with protected characteristics from groups where a disparity has been shown by the review of disparities in risks and outcomes (for example, age and sex, where someone lives, deprivation, ethnicity and/or people's occupation).

## Estates

### Fire safety

Fire safety management plans should be reviewed and checked in line with operational changes. You should check:

- all fire doors are operational at all times
- the fire alarm system and emergency lights have been tested and are fully operational

Carry out emergency drills as normal. You should make adjustments to fire drills to allow for social distancing as appropriate. Refer to fire safety advice.

### Ventilation systems

Where mechanical ventilation systems exist, they should be maintained in accordance with the manufacturers recommendations. Good ventilation with fresh air is essential at all times in settings and particularly during this period.

Refer to the system of controls for guidance on how to keep occupied spaces well ventilated.

### Reopening buildings

If buildings have been closed or have had reduced occupancy, water system stagnation can occur due to lack of use. This can increase the risk of Legionnaires' disease.

Advice on safely re-occupying buildings can be found in the Chartered Institute of Building Services Engineers guidance on emerging from lockdown.

## Emergency first aid

The Health and Safety Executive guidance on first aid during the coronavirus (COVID-19) pandemic supports local risk assessments and provides guidance for first aiders.

It is clear that treating any casualty properly should be the first concern. Where it is necessary for first aid provision to be administered in close proximity, those administering it should pay particular attention to sanitation measures immediately afterwards, including washing hands.

More information on paediatric first aid certificates during the coronavirus (COVID -19) pandemic can be found in the guidance on early years foundation stage: coronavirus disapplications.

# Public health advice

We have worked closely with the Department of Health and Social Care (DHSC) and PHE to develop this guidance. Based on the recent ONS data, the risks to education and childcare staff are similar to those for most other occupations.

The way to control this virus is the same, even with the current variants.

You must comply with health and safety law and put in place proportionate control measures. To meet these obligations, you must:

- review your health and safety risk assessments in light of this refreshed guidance; and
- make any necessary changes to your control measures applying the system of controls

## System of controls

The 'system of controls' set out in this section provides a set of principles for infection control and if you follow this advice and maximise the use of these control measures, they will effectively minimise risks of viral transmission.

We know that the predominant variant of coronavirus (COVID-19) is more transmissible; however, PHE advice remains that the way to control this virus is with the system of controls, even with these new variants.

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.

# System of controls: Summary

## Prevention

You must always:

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

You 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

# System of controls: prevention

This section contains actions relating to systems of control: prevention.

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

**When an individual needs to self-isolate**

Children, staff and other adults must not come into the 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 or have tested positive
- they are legally required to quarantine, having recently visited countries outside the Common Travel Area
- they have had a positive test
- they have been in close contact with someone who tests positive for coronavirus (COVID-19)

They must not attend with immediate effect and for at least 10 full days from the day after:

- the start of their symptoms
- the test date, if they did not have any symptoms but had a positive test (whether this was a lateral flow device (LFD) or polymerase chain reaction (PCR) test) – staff with a positive LFD test result will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result

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

**When an individual develops coronavirus (COVID-19) symptoms at the setting**

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 stay at home: 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, or the day their test was taken if they did not have symptoms, whether this was a lateral flow device (LFD) or polymerase chain reaction (PCR) test), 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 anyone tests positive whilst not experiencing symptoms but develop symptoms during the isolation period, they must restart the 10-day isolation period from the day they developed symptoms.

If a child is awaiting collection:

- they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required
- a window should be opened for fresh air ventilation, if it is safe to do so
- if it is not possible to isolate them, move them to an area which is at least 2 metres away from other people
- if they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible – the bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else
- personal protective equipment (PPE) must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs) – more information on PPE use can be found in the safe working in education, childcare and children's social care

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.

The individual should not use public transport if they are symptomatic. If arranging their return to their family home to isolate, settings should follow advice on transport arrangements in the safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE).

Public Health England (PHE) has good evidence that routinely taking the temperature of children is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).

Further action to take when someone tests positive in the setting can be found in section 11, Manage and report confirmed cases of coronavirus (COVID-19) amongst the setting 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 with 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 is unwell. 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 outside the home.

If you are contacted by NHS Test and Trace or your local health protection team and told to self-isolate because you have been a close contact of a positive case, you have a legal obligation to do so.

## 2) Ensure face coverings are used, in recommended circumstances

The government is not recommending universal use of face coverings in early years settings because the system of controls provides additional mitigating measures. Some people are unable or advised not to wear face coverings including children under the age of 11. PHE also advise that for health and safety reasons, face coverings should not be used in any circumstances for children under 3. Misuse may inadvertently increase the risk of transmission, and there may also be negative effects on communication and children's development.

### Adult use of face coverings

In early years settings, 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 early years settings 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 settings 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).

Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles 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.

There are some places outside of the setting where the law requires face coverings to be worn, for example on public transport. Further information can be found in face coverings: when to wear one and how to make your own.

**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 severe distress
- if speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expression 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 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 staff and visitors and allow for adjustments to be made for adults with special educational needs and disabilities (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 may consider bringing a spare face covering to wear if their face covering becomes damp during the day.

Additional guidance is available in preventing and controlling infection, including the use of PPE, in education, childcare and children's social care settings.

## 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 the setting
- when they return from breaks
- when they change rooms
- before and after eating
- after using the bathroom

Consider how often children and staff will need to wash their hands and incorporate time for this into daily routines.

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.

You will typically have handwash basins in or adjacent to the rooms children use, so may be able to use these to maximise hand washing.

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 cleaning wipes can be used as an alternative
- building these routines into setting culture, supported by behaviour expectations and helping ensure younger children 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 children understand that this is now part of how the setting operates. Get free resources, including materials to encourage good hand and respiratory hygiene from e-bug's information about coronavirus (COVID-19).

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 the 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 the day, 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 COVID-19: cleaning of non-healthcare settings outside the home. 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 across the setting and maintain social distancing 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. You must do everything possible to minimise contacts and mixing while delivering a broad and balanced provision.

### Minimise mixing

Early years settings can operate at normal group sizes. You should still consider how you can minimise mixing within settings, for example using different rooms for different age groups, keeping those groups apart as much as possible. Minimising contact between groups can reduce the number of children and staff required to self-isolate in the event of children or staff testing positive for coronavirus (COVID-19).

This does not extend to cover provision for children over the age of 5. Where early years settings are also caring for children over the age of 5, you should ensure they are also following guidance on protective measures for out-of-school settings during the coronavirus (COVID-19) outbreak which includes guidance on group sizes.

### Attending more than one setting

There may be situations where a child needs to attend more than one setting, for example, children attending a childminder before their nursery opens so that their parent or carer may go to work.

Parents and carers should be encouraged to limit the number of settings their child attends, ideally ensuring their child only attends the same setting consistently. This should also be the same for staff.

Where a child routinely attends more than one setting on a part time basis, you should encourage parents and carers to work through the system of controls collaboratively with you to address any risks identified and allow them to jointly deliver appropriate care for the child. This section of the guidance contains more information about the system of controls.

### Shared staff spaces

You should plan how shared staff spaces are set up and used to help staff to distance from each other. Use of staff rooms should be minimised, although staff must still have a break of a reasonable length during the day.

### Travelling to the setting

Children, parents, carers and staff may use public transport where necessary, but we encourage them to walk, cycle or scoot to and from the setting, wherever it is possible and safe to do so. Where children, parents, carers and staff need to use public transport, they should follow the safer travel guidance for passengers.

**Equipment**

For individual and very frequently used equipment, such as pencils and pens, staff should have their own items. Resources, such as books, toys and equipment, can be used and shared within consistent groups. These should be cleaned regularly, along with all frequently touched surfaces.

Resources that are shared between groups, such as sports, art and cooking equipment should be cleaned frequently. When sharing equipment between different groups, you should either:

- clean it before it is moved between groups
- allow them to be left unused for a period of 48 hours (72 hours for plastics)

Outdoor playground equipment should be more frequently cleaned than normal. This also applies to resources used inside and outside by wraparound care and out-of-school setting providers.

Children should limit the amount of equipment they bring to the setting each day to essentials such as:

- lunch boxes
- hats and coats
- books
- comforters

Bags are allowed.

Children and staff can take books and other shared resources home, although unnecessary sharing should be avoided. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.

**Parent pick-up or drop-offs**

We know that travel-to-setting patterns differ greatly between settings. If those patterns allow, you should consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave the setting.

Staggered start and finish times should not reduce the amount of overall time children spend in the setting. A staggered start may, for example, include keeping the length of the day the same but starting and finishing later to avoid busy periods.

You should consider how to communicate this to parents and carers and remind them about the process that has been agreed for drop off and collection, including that gathering at the setting entrance and otherwise coming onto the site without an appointment is not allowed.

## 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 the setting is in operation, it is important to ensure it is well ventilated and a comfortable teaching and learning 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 (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 where safe to do so (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)

The HSE ventilation and air conditioning during the coronavirus (COVID-19) pandemic and CIBSE - coronavirus (COVID 19) guidance 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

Face coverings are not classified as PPE (personal protective equipment). PPE is used in a limited number of settings to protect wearers against hazards and risks, such as surgical masks or respirators used in medical and industrial settings. A face covering is a covering of any type which covers your nose and mouth.

Most staff in settings will not require PPE beyond what they would normally need for their work. If a child already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used.

Additional PPE for coronavirus (COVID-19) is only required in a very limited number of scenarios, for example, when:

- a child becomes ill with coronavirus (COVID-19) symptoms, and only then if a 2-metre distance cannot be maintained
- performing aerosol generating procedures (AGPs)

When working with children who cough, spit or vomit but do not have coronavirus (COVID-19) symptoms, only the PPE that would be routinely worn, should be worn.

The guidance on safe working in education, childcare and children's social care provides more information about preventing and controlling infection. This includes:

- when and how PPE should be used
- what type of PPE to use
- how to source it

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

Rapid testing remains a vital part of our plan to supress this virus. The use of rapid lateral flow antigen tests allows settings to identify asymptomatic cases that would otherwise go undetected.

Early years staff in school-based nurseries, maintained nursery schools and private, voluntary and independent nursery settings are part of the asymptomatic testing programme offering home lateral flow device (LFD) test kits for twice weekly testing. For more information read rapid asymptomatic coronavirus (COVID-19) testing in early years settings

All childminders can access asymptomatic twice-weekly testing by either:

- attending a test site to get tested where they will be able to see how to take the test or pick up tests to do at home.
- collecting tests to do at home find-covid-19-rapid-test-sites-maps-test-and-trace
- order a test kit online

This testing offer is also extended to anyone who works in an occupation related to an early years childcare provider and their household, childcare and support bubbles. In addition, the households, childcare and support bubbles of early years children are also

able to access twice-weekly asymptomatic testing. Find out more from regular rapid coronavirus (COVID-19) tests if you do not have symptoms.

Expanding home testing kits to all early years settings will help to identify positive cases more quickly and break the chains of transmissions.

Essential workers, such as early years staff, have been accessing testing through local community testing programmes, which became available to all local authorities from 11 January 2021. These are led by local authorities and provide asymptomatic testing through testing sites based in the local community.

Staff 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 negative, it overrides the self-test LFD test and the staff member can return to the early years setting. Those with a negative LFD test result can also continue to attend the early years setting and use protective measures.

# System of controls - response to any infection

This section contains actions relating to systems of control: response to any infection.

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

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 their sense of smell or taste
- self-isolate immediately and not come to the setting if:
  - they develop symptoms
  - they have been in close contact with someone who tests positive for coronavirus (COVID-19)
  - anyone in their household, 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 advised to isolate by NHS test and trace or the PHE local health protection team
- 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

Staff with a negative LFD test result can continue to attend the setting unless they have individually been advised otherwise by NHS Test and Trace or Public Health professionals (for example as a close contact). They should continue to apply the measures in the system of controls to themselves and the setting.

**Booking a polymerase chain reaction (PCR) test**

Anyone who displays symptoms of coronavirus (COVID-19), or staff who have a positive LFD test result, should get a PCR test as quickly as possible. Tests for symptomatic illness can be booked online through testing and tracing for coronavirus or ordered by telephone through NHS 119 for those who don't have access to the internet.

Essential workers, which includes anyone involved in education or childcare have priority access to testing.

All children 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.

**NHS COVID-19 app**

The NHS covid-19 app is available to anyone aged 16 and over to download if they choose.

**Test and Trace Support Payments**

Some staff, parents and carers may be eligible for a one-off Test and Trace support payment of £500. This is payable in one lump sum from your local authority.

To be eligible for a Test and Trace support payment, you should meet all of the following criteria:

- be on a low income
- be unable to work from home
- be at risk of losing income as a result of self-isolating
- live in England
- meet the eligibility criteria

Staff identified as close contacts of a positive case will require an NHS Test and Trace account ID number (CTAS number) to be able to claim a Test and Trace support payment or discretionary payment.

You should provide a completed template to parents and carers of self-isolating children to support their application for payment. A template letter is available for early years settings on the document sharing platform or from the DfE helpline. Parent and carers will not require an NHS Test and Trace account ID number (CTAS number).

The Department for Health and Social Care has launched the self-isolation service hub (telephone number 020 3743 6715). The phone line is open 7 days a week, 8am to 8pm, allowing a setting to provide contact details of any staff who have been asked to self-isolate and are likely to be eligible for the Test and Trace support payment or discretionary payment.

By providing these details, close contacts of positive cases identified at the setting will be formally advised to self-isolate by NHS Test and Trace and provided with an NHS Test and Trace account ID. Individuals who have not been formally advised to self-isolate by NHS Test and Trace will not receive an NHS Test and Trace account ID and will not be able to claim from the Test and Trace support payment scheme.

In order for any of your staff who may be eligible for a payment from the Test and Trace support payment scheme to be able to claim, you should follow these steps:

1. Ensure that you collate a list of appropriate close contacts for the person who has tested positive within your establishment and inform these close contacts that they now need to self-isolate.
2. Call the service hub on 020 3743 6715 as soon as you have the eight-digit NHS Test and Trace account ID (sometimes referred to as a CTAS number) of the person who has tested positive.
3. Provide the details of the person who has tested positive, along with the details of the relevant staff members you have identified as close contacts. If you do not have NHS Test and Trace account ID for the person who has tested positive, Hub staff will assist in tracing the person in order to register their contacts on the Test and Trace system (CTAS).
4. NHS Test and Trace will then contact individuals to formally advise them of their need to self-isolate and provide them with an NHS Test and Trace account ID.
5. Following this, individuals who are employed or self-employed, on a low income, unable to work from home and losing income as a result may qualify for the test and trace support payment scheme through their local authority.

**Applications from parents and carers who need to take time off work to care for a child who is self-isolating**

Eligible parents and carers of children who have been advised to self-isolate by their education or childcare setting (even where they have not been told to isolate by NHS Test and Trace) can also apply for the Test and Trace support payment scheme if they are on a low income, unable to work from home and need to take time off work to care for a child who is self-isolating. Parents and carers do not require an NHS Test and Trace account ID number in order to claim and you are not required to register all children asked to self-isolate with NHS Test and Trace in the same way as staff.

The scheme is open to eligible parents and carers of children aged 15 and under, and parents of young people aged 16 to 25 with an Education Health and Care Plan. Find out more about how parents and guardians can claim financial support under the Test and Trace Support Payment scheme.

You should provide parents and carers of children advised to self-isolate with the template letter (available from the document sharing platform or from the DfE helpline), detailing the child's name and the dates of their isolation period. The parent or carer will need to use this letter as supporting evidence for as part of their application to their local authority for a payment from the Test and Trace support payment scheme. Parents whose children are told to self-isolate by their setting will not be able to apply for financial support without a letter.

When a parent or carer applies to the Test and Trace support payment scheme because they need to care for a child who is self-isolating, their local authority will be required to contact their child's setting via phone or email to verify information about the child. This includes the child's name, age and dates of self-isolation. This is a standard check against fraudulent claims, and may take place before or after a payment is made.

You will only be asked to share information on children whose parents have made an application to their local authority for the Test and Trace support payment scheme. You may wish to update your data privacy notice to reflect this.

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

### Action to take on result of a test

You must take swift action when you become aware that someone who has attended the setting has tested positive for coronavirus (COVID-19) having developed symptoms and taken a test. You should ask parents, carers and staff to inform you immediately of the results of a test and follow this guidance.

If you would like support on the action you should take to respond to a positive case, you can contact the dedicated advice service introduced by Public Health England (PHE) and delivered by the NHS Business Services Authority. This can be reached by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case. You will be put through to a team of advisers who will inform you of what action is needed based on the latest public health advice.

The advice service (or PHE local health protection team if escalated) will work with you to guide you through the actions you need to take. Based on their advice, you must send home those people who have been in close contact with the person who has tested positive, advising them 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.

'A contact' is a person who has been close to someone who has tested positive for COVID-19. You can be a contact any time from 2 days before the person who tested positive developed their symptoms (or, if they did not have any symptoms, from 2 days before the date their positive test was taken), and up to 10 days after, as this is when they can pass the infection on to others. A risk assessment may be undertaken to determine this, but a contact can be:

- anyone who lives in the same household as someone with coronavirus (COVID-19) symptoms or who has tested positive for coronavirus (COVID-19)
- anyone who has had any of the following types of contact with someone who has tested positive for coronavirus (COVID-19) with a PCR or LFD test:
  - face-to-face contact including being coughed on or having a face-to-face conversation within 1 metre
  - been within 1 metre for 1 minute or longer without face-to-face contact
  - been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
  - travelled in the same vehicle or a plane

The advice service (or PHE local health protection team if escalated) will provide advice on who must be sent home and asked to isolate. To support them in doing so, we recommend you keep a record of children and staff in each group, and any close contact that takes places between children and staff in different groups. This should be a proportionate recording process. You do not need to ask staff to keep definitive records in a way that is overly burdensome.

A template letter has been provided to all settings to send to parents of children asked to self-isolate. This can also be used for staff, if needed. It is important that this letter is shared promptly with all parents of children that have been asked to self-isolate as this letter allows parents who are on a low income and unable to work from home to apply to their local authority for financial support under the Test and Trace support payment scheme. They will not be able to make an application without providing this letter as supporting evidence.

You must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others. Household members of those contacts who are sent home do not need to self-isolate themselves unless the child or staff member who is self-isolating subsequently develops symptoms or unless they have been told to self-isolate by NHS Test and Trace or their public health protection team, 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 the stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection. They should get a test, and:

- if the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period – this is because they could still develop coronavirus (COVID-19) within the remaining days
- if the test result is positive, they should inform their setting immediately, and should isolate from the day of onset of their symptoms and at least the following 10 full days – their household should self-isolate starting from when the symptomatic person in their household first had symptoms and the next 10 full days, following stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection

Find out what to do if a child or adult is displaying symptoms, or is a confirmed case, of coronavirus (COVID-19) in an early years setting and testing and tracing for coronavirus.

### Report a confirmed case or closure of a setting

You must notify Ofsted or the childminder agency with which you are registered of any confirmed cases in the setting (either child or staff member). You should also tell Ofsted if you have to close the setting as a result. This is a legal requirement. Report as soon as you are able to, and in any case within 14 days. Read the guidance on reporting incidents to ensure all of the information required is included.

**Admitting children and staff back to the setting**

The child or staff member who tested positive for coronavirus (COVID-19) can return to their normal routine and stop self-isolating if they meet the following conditions:

- they have finished their isolation period and their symptoms have gone or
- they continue to have only a residual cough or anosmia. This is because a cough or anosmia can last for several weeks once the infection has gone
- they have a negative PCR test result after having a positive LFD test

The child or staff member should not return if they still have a high temperature after 10 days or are otherwise unwell, they are advised to stay at home and seek medical advice.

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.

In the vast majority of cases, settings and parents and carers will be in agreement that a child with symptoms should not attend the setting, given the potential risk to others. In the event that a parent or carer insists on a child attending the setting, you can take the decision to refuse the child if, in your reasonable judgement, it is necessary to protect children and staff from possible infection with coronavirus (COVID-19). Any such decision would need to be carefully considered in the light of all the circumstances and current public health advice.

## 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 call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if additional action is required. You can reach them by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.

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 a group.

If you are implementing the system of controls, addressing any issues you have identified and therefore reducing transmission risks, whole site closure will not generally be necessary. You should not close except on the advice of health protection teams.

# Other safety in setting controls

## Travel and transport

You should consider how you can work with parents and carers to agree how best to manage any necessary journeys, for example, pick-ups and drop-offs at schools, to reduce the need for a provider to travel with groups of children.

Settings, parents and carers should work through the system of controls collaboratively, to identify and address any risks and allow them to jointly deliver appropriate care for the child. Further information is available in stay at home guidance.

### Mode of transport

If it is necessary for a childminder to pick-up or drop-off a child at school, or when taking children on a trip, walking is preferable. If this is not practicable, then a private vehicle for single household use is preferable. Use of public transport should be minimised.

Information on using private and public transport can be found in coronavirus (COVID-19): safer travel guidance for passengers.

## Visitors to the setting

There will be occasions when visits to the setting are necessary, but you are encouraged to avoid visitors entering your premises, wherever possible. Settings should ensure visitors follow the system of controls, remain socially distanced from other adults, and wear face coverings where needed.

A record should be kept of all visitors which follows the guidance on maintaining records of staff, customers and visitors to support NHS Test and Trace.

### External professionals

In instances where settings need to use other essential professionals such as social workers, speech and language therapists or counsellors, or other professionals to settings support delivery of a child's EHC plan, settings should assess whether the professionals need to attend in person or can do so virtually.

If they need to attend in person, they should:

- follow guidance relevant to the setting
- keep the number of attendances to a minimum
- be informed about the system of controls

You should, along with the local authority and health partners (where applicable), work with families to co-produce arrangements for delivering all therapies and support that would normally be in place for children with EHC plans. There may be times when it becomes more difficult to do so than usual, particularly if children are isolating.

Decisions should be considered on a case-by-case basis which takes account of the needs of, and circumstances specific to, the child, avoiding a 'one size fits all' approach. The statutory duties and timescales remain in place for EHC needs assessments and reviews. At all times it is important that these continue to ensure that the child, and their parent and carer, is at the centre of the process and can engage with the process in a meaningful way. It is important that you co-operate in supporting timely consultations and in providing families with advice and information where requested.

### New admissions

For new admissions, settings should consider providing virtual tours for prospective parents and carers. If parents and carers are keen to visit in person, settings should consider:

- ensuring face coverings are worn if required in line with arrangements for staff and other visitors to the setting (read the section on face coverings)
- regular handwashing, especially before and after the visit
- holding visits after hours. If this is not possible, consider limiting visits to the outside play areas during regular hours, and ensure strict social distancing is observed

Prior to a visit, settings should ensure that parents and carers are aware:

- of the system of controls
- how this impacts them and their responsibilities during their visit
- how to maintain social distancing from staff, other visitors, and children other than those in their care

### Parents settling children

Parents and carers are able to enter a setting to help their children adapt to their new environment. Settings should ensure that parents and carers:

- wear face coverings, if required, in line with arrangements for staff and other visitors to the setting (read the section on face coverings)
- stay for a limited amount of time (ideally not more than an hour)
- avoid close contact with other children
- are aware of the system of controls, how this impacts them, and their responsibilities in supporting it when visiting a setting with their child

### Other visits by parents and carers

In-person visits from parents and carers can take place if they are necessary but settings should make use of remote visits wherever possible. Settings should work with parents and carers to ensure they still have visibility of the childcare environment during this time, including through the use of remote visits, photos and phone calls. Guidance on parent and child groups is available.

### Other visitors

You should consider how to manage other visitors to the site, such as contractors, and ensure site guidance on social distancing and hygiene is explained to visitors on, or before, arrival. Where visits can happen outside of setting hours they should. A record should be kept of all visitors - where this is practical - which follows the guidance on maintaining records of staff, customers and visitors to support NHS Test and Trace.

## Supervised toothbrushing programmes

Supervised toothbrushing programmes may be re-established within settings using the dry brushing method. The wet brushing model is not recommended because it is considered more likely to risk droplet and contact transmission and offers no additional benefit to oral health over dry toothbrushing.

For information on the cleaning and storage of toothbrushes and storage systems, read the guidance for supervised toothbrushing programmes in early years and school settings.

## Malleable materials (messy play)

You should risk assess activities that involve malleable materials for messy play such as sand, mud and water, as part of their regular curriculum planning.

A risk assessment should consider whether:

- materials can be handled by a consistent group of children and that no one else outside this group can come into contact with it

- the malleable material for messy play (for example sand, water or mud) can be used and cleaned - including being replaced - in accordance with the manufacturer's instructions, where applicable. For example, read managing risk in play provision: implementation guide

You should follow the system of controls and ensure that:

- children wash their hands thoroughly before and after messy play
- frequently touched surfaces, equipment, tools and resources for messy play are thoroughly cleaned and dried before they are used by a different group

Further general cleaning advice can be found in COVID-19: cleaning in non-healthcare settings outside the home

### Side effects of children taking a routine vaccination or teething

Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (COVID-19) is suspected. Find out more from vaccination tips for parents.

Whilst teething can cause some known side effects such as flushed cheeks and sore gums, NHS guidelines state that fever is not a symptom of teething.

Parents and carers should monitor side effects from a vaccination or teething, and if they are concerned about their child's health, they should seek advice from their GP or NHS 111.

If coronavirus (COVID-19) is suspected the child should start isolating and get tested. Settings should follow the advice in the system of controls.

## Music, dance and drama

This guidance relates to organised group activity, not to spontaneous singing, dance and role-play that young children may naturally do, and should be encouraged to do, by early years practitioners.

You should continue providing organised music, dance and drama as part of the curriculum, especially as this builds children's confidence and supports their wellbeing. There may, however, be an additional risk of infection in environments where organised singing, chanting, playing wind instruments, dance and drama takes place.

Singing and wind instrument playing can be undertaken in line with this and other guidance, including guidance provided by the DCMS for professionals and non-professionals, performing arts - working safely during coronavirus (COVID-19).

You can continue to engage peripatetic staff during this period, including staff from music education hubs. Further information on the music education hubs, including contact details for local hubs, is available at music education hubs published by the Arts Council England.

### Minimising mixing groups and volume control

You should take particular care in music, dance and drama sessions that children remain in their usual groups. If staff need to move between groups of children, they should try and keep their distance from other staff as much as they can, ideally 2 metres from other adults.

Additionally, you should keep any background or accompanying music to levels which do not encourage participants to raise their voices unduly. If possible, use microphones to reduce the need for shouting or prolonged periods of loud speaking or singing. If possible, do not share microphones. If they are shared, follow the guidance on handling equipment.

## Organised performances

You should not host any performances with an audience. You may wish to consider alternatives such as live streaming and recording performances, subject to the usual safeguarding considerations and parental permission.

## Organised music sessions, including singing, and playing wind instruments in groups

When planning music provision, you should consider additional specific safety measures. There is some evidence that additional risk can build from aerosol transmission with volume and with the combined numbers of individuals within a confined space. This is particularly evident for singing and shouting, but with appropriate safety mitigation and consideration, singing, wind and brass teaching can still take place. Measures to take follow in the next sections. You can also use the advice on safer singing.

Measures to take include:

- playing instruments and singing in groups should take place outdoors wherever possible
- if indoors, consider limiting the numbers in relation to the space, for example, larger rooms - rooms with high ceilings are expected to enable dilution of aerosol transmission
- if playing indoors limit the numbers to account for ventilation of the space - it is important to ensure good ventilation – advice on this can be found in ventilation and air conditioning during the coronavirus (COVID-19) pandemic position wind players so that the air from their instrument does not blow into another player
- if taking place indoors try to sit back to back or side by side
- use microphones where possible or encourage singing quietly

## Handling equipment and instruments for organised sessions

Measures to take when handling equipment, including instruments, include:

- increased handwashing before and after handling equipment, especially if being used by more than one person
- avoid sharing instruments and equipment, wherever possible
- if instruments and equipment have to be shared, disinfect regularly (including any props, microphones and music stands) and always between users, following government guidance on cleaning and handling equipment
- consider limiting the number of suppliers when hiring instruments and equipment and:
  - agree with suppliers whose responsibility it is to clean hired instruments
  - clean hire equipment, tools or other equipment on arrival and before first use
  - store equipment and instruments in a clean location if you take delivery of them before they are needed
  - clean them before first use and before returning the instrument
- create picking-up and dropping-off collection points where possible, rather than passing equipment such as props, and microphones hand-to-hand

## Individual lessons

Individual lessons in music, dance and drama can continue in settings. This may mean teachers interacting with pupils from multiple groups, so you will need to take particular care, in line with the measures set out above on peripatetic staff.

In individual lessons for music, dance and drama, social distancing should be maintained wherever possible, meaning teachers should not provide physical correction.

# Children's attendance

## Absence of vulnerable children

Vulnerable children include those who have a social worker, an education, health and care (EHC) plan or who may be vulnerable for another reason at local discretion ("otherwise vulnerable").

You should allow and strongly encourage parents and carers of vulnerable children for their child to attend the setting. In particular, children with a social worker are expected to attend provision (subject to public health advice), given their safeguarding and welfare needs.

You should also:

- follow up with the parent or carer, working with the local authority and social worker (where applicable), to explore the reason for absence and discuss their concerns
- focus the discussions on the welfare of the child and ensuring that the child is able to access appropriate support while they are at home
- keep the situation under review and informed by any changes to the child's welfare
- have in place procedures to maintain contact
- make sure their parents and carers know that they can revisit their decision not to attend at any point in time

If you have to temporarily stop onsite provision on public health advice, you should discuss alternative arrangements for vulnerable children with the local authority.

## Children self-isolating or shielding

A small number of children will still be unable to attend early years settings in line with public health advice to self-isolate because they:

- have symptoms or have had a positive test result
- live with someone who has symptoms or has tested positive and are a household contact
- are a close contact of someone who has tested positive for coronavirus (COVID-19)
- are required to isolate for travel-related reasons

More information is available in the guidance on shielding.

Shielding advice has been paused nationally from 31 March. All CEV children should attend their setting unless they are one of the very small number of children under paediatric or other specialist care and have been advised by their GP or clinician not to attend. Children who live with someone who is CEV should continue to attend their setting as normal.

**Vulnerable children**

Where a vulnerable child is self-isolating or shielding, it is important that settings put systems in place to keep in contact with them.

When a vulnerable child is required to self-isolate, you should:

- notify their social worker (if they have one)
- agree with the social worker the best way to maintain contact and offer support

## Parents or carers who are anxious about their child attending the setting

You need to consider that some parents and carers may be reluctant or concerned about their child attending the setting.

This may include:

- children who have themselves been shielding previously but have been advised they no longer need to shield
- children living in a household where someone is clinically vulnerable or are CEV
- parents and carers who are concerned about the possible increased risks from coronavirus (COVID-19) such as those who have certain conditions such as obesity or diabetes

Discuss any concerns with parents and carers and provide reassurance about the measures you are putting in place to reduce any risks, including the system of controls and testing. Discuss with individual parents and carers other specific measures that can be put in place to ensure that the children can regularly attend and emphasise the benefits of regular attendance.

## Action to take when a child's usual provider is closed

Local authorities should work with settings which are closed to identify alternative provision for children who need places. Parents and carers can also approach local authorities if their usual provider is not open. If a child moves setting, important information should be provided by the parent or carer to the new setting on day one, including emergency contact details, dietary requirements and medical needs to safeguard the health, safety and welfare of the child.

In the case of vulnerable children, the closed setting should notify the local authority (and social worker, where relevant) that there are vulnerable children who need alternative provision. The closed setting should work with the families of vulnerable children and local authorities (and social workers, where relevant) to support this.

Where a setting has closed, and a vulnerable child moves to a different early years setting:

- the closed provider should do whatever it reasonably can to provide the receiving setting with any relevant welfare and child protection information
- the receiving setting should be aware of the reason the child is vulnerable and any arrangements in place to support them – as a minimum, the receiving setting should, as appropriate, have access to a vulnerable child's EHC plan, child in need plan, child protection plan or, for looked-after children, their personal education plan, and know who the child's social worker is (and, for looked-after children, know who the responsible virtual setting head is)
- the transfer of necessary information should ideally happen before a child arrives at the new setting and, where that is not possible, as soon as reasonably practicable – any exchanges of information will ideally happen between the designated safeguarding leads (or deputies), and between special educational needs co-ordinators (SENCOs) or named individual with oversight of special educational needs provision for children with EHC plans

While providers must continue to have appropriate regard to data protection and the General Data Protection Regulation (GDPR), this does not prevent the sharing of information for the purposes of keeping children safe. Find out more from Information sharing: advice for practitioners.

## Staying in touch with parents or carers whose child is at home

All children should be able to attend as normal, with the exception of those children who may still have to shield or isolate.

We recognise that many settings have already shared resources for children who are at home and we are grateful for this.

You should consider how:

- to continue to support the learning of children who do not attend settings including how these children can maintain contact with their key person and peers through the early years setting
- parents and carers can be supported to provide a positive learning environment at home

You can also direct parents and carers to:

- Hungry Little Minds provides simple fun, activities for kids aged 0 to 5 for parents to do at home with children to support their early learning
- BBC Tiny Happy People activities for babies, toddlers and children
- Family Zone - National Literacy Trust
- help children aged 2 to 4 to learn at home during coronavirus (COVID-19)

You should work with local authorities to monitor the welfare of:

- vulnerable children who are not attending provision
- other children they might wish to keep in touch with, for safeguarding purposes

### Prioritising early years places

If there is a need to prioritise places (for example, where a nursery is oversubscribed, or unable to operate at full capacity), you should give priority to vulnerable children and children of critical workers, then 3- and 4-year-olds, in particular those who will be transitioning to reception, followed by younger age groups. Local authorities should work with settings to identify provision for children who need places.

## Considerations for operating the setting

### When the premises from which a setting operates is closed, such as community centre, village or church hall

Community centres, village halls and places of worship have been able to open for providers on the early years register which usually use those premises. Providers should ensure:

- they are acting in line with the guidance on safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE)
- they are managing risks related to other users of the premises

### Operating breakfast and after school clubs and other providers of wraparound childcare

Providers of wraparound childcare should refer to the guidance protective measures for holiday and after-school clubs, and other out-of-school settings during the coronavirus (COVID-19) outbreak

### Trips made outside of the setting

**Educational day visits**

We recognise the significant benefits of educational visits for children's educational development as well as their mental health and wellbeing and are taking steps to allow children to enjoy visits in line with the government's roadmap. The 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 and based on 4 tests.

For that reason, all dates below are indicative and subject to change. Advice will be updated in line with the roadmap.

In line with the roadmap, settings can resume educational day visits from 12 April 2021.

Any educational day visits must be conducted in line with relevant coronavirus (COVID-19) secure guidelines and regulations in place at that time. This includes the system of controls, such as keeping children within their consistent groups, and the COVID-19 secure measures in place at the destination.

You 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, you 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. You should consult the health and safety guidance on educational visits when considering visits.

**Use of private and public outdoor spaces**

You should maximise the use of private outdoor space.

You can take groups of children on trips to outdoor public places for exercise and do not need to be restricted to limits on gatherings, provided:

- it is for the purpose of childcare
- you remain within the EYFS staff child ratios
- you conduct a risk assessment in advance
- the risk assessment demonstrates that they can remain socially distant (2 metres) from other people and groups, wherever possible
- good hygiene is maintained throughout
- thorough handwashing happens before and after the trip
- the trip is carried out in line with relevant local or national coronavirus (COVID-19) guidance depending on what restrictions are in force on the day of the trip and coronavirus (COVID-19) secure measures on transport and at the destination
- appropriate insurance arrangements are in place

The Association of British Insurers (ABI) has produced information on travel insurance implications following the coronavirus (COVID-19) outbreak. If you have any questions about your cover, or would like further reassurance, you should contact your insurance provider.

**Trips to indoor spaces**

You should ensure you have fully assessed the risks and have completed a risk assessment prior to an essential journey. You, parents and carers should work through the system of controls collaboratively, to identify and address any risks and allow them to jointly agree appropriate care for the children.

You should follow the guidelines relevant to the indoor space. Once inside:

- you should remain with the children in your group
- the group should socially distance from other individuals and groups
- children and staff should wash hands thoroughly on arrival and before leaving
- adults (and children over 11) will be required to follow the face covering policy for the indoor space. This may include wearing a face covering before entering and keeping it on until they leave

## Arrangements for providing meals

Where children qualify for benefits-related free school meals, because they meet the qualifying criteria, including receiving education both before and after lunch during term-time, they should receive this support as normal. In any instance where an eligible child is self-isolating at home due to coronavirus (COVID-19), this support should continue to be provided (where possible) for example via the provision of a food parcel.

In all other settings, where free meals do not apply, settings may charge for meals in line with national entitlements guidance. Settings should consider the impact of charges on disadvantaged families. Kitchens should comply with the guidance for food businesses on coronavirus (COVID-19).

## Parent and child groups

It is a legal requirement that support groups, and parent and child groups, must be organised by a business, a charitable, benevolent or philanthropic institution, or a public body, and must only be held in places that are permitted to be open and not in private homes or gardens.

Groups must have no more than 15 attendees. Children under 5 years and someone who is working as part of the group, such as a group leader, are not counted in the number.

> Support groups, such as for breastfeeding, postnatal, and baby and toddler groups, for the provision of support for parents, carers and their children, that are necessary to deliver in person, can continue to take place indoors and outdoors but must follow the same rules as other support groups. Support groups do not typically permit groups focused on social or development activities, such as singalong or art classes.
>
> From 12 April 2021, all parent and child groups, for the benefit of children under 5 years of age, can meet indoors and outdoors.

**Protective measures for parent and child groups**

You should follow the advice in this guidance to ensure that participants follow the system of controls, which will help towards mitigating the risks of coronavirus (COVID-19) for all children and adults in the setting.

It is important for group leaders to ensure:

- a risk assessment is completed prior to groups and activities taking place
- social distancing is maintained between adults who do not live together and who are not in the same support bubble
- everyone maintains good hand hygiene all should clean their hands regularly, including as they arrive, between activities, and as they leave
- adults wear face coverings where social distancing between adults is not possible (for example, when moving around in corridors and in communal areas). Read system of controls for more information on face coverings.
- (where permitted to be held indoors) the areas used are well ventilated with fresh air (read the section on ventilation)
- groups and activities take place separately from areas being used at the same time by registered children attending an Ofsted registered setting
- any rooms used by these groups are cleaned after each use
- a record of all visitors to the setting is kept

**Singing in parent and child groups**

Group singing can take place, where it is necessary for the group to meet. Taking account of the evidence about singing and COVID-19, singing is considered safer when limited numbers of people sing together.

From 12 April 2021, where the singing is to take place outdoors and:

- organised as 1 group - no more than 6 adults, including the group leader, should sing at any one time along with the children aged under 5
- the group is broken up into smaller groups of no more than 6 adults - the adults can sing together in each group along with the children aged under 5 and the same groups should be maintained for the duration of the session

Where singing is to take place indoors, no more than 6 adults in the room, including the group leader, should sing and singing should be limited to the same 6 adults for the duration of the group session. Good ventilation with fresh air should be maintained throughout the session.

There is guidance in the music, dance and drama section and additional guidance that should be followed in principles of safer singing and performing arts - working safely during coronavirus (COVID-19).

## Charging parents and carers if their child is unable to take up their place

Providers should continue to be fair and balanced in dealings with parents or carers and must continue to avoid unfair charging practices. Providers should refer to:

- the open letter to the early years' sector published by the Competitions and Markets Authority (CMA) on the 28 July 2020

- the CMA's detailed advice to the nursery and early years sector about coronavirus (COVID-19) restrictions and consumer law advice
- the CMA's broader advice on cancellations and refunds for consumer contracts affected by coronavirus (COVID-19) health restrictions

Providers should be cautious about charging parents who wish to withdraw their child from an early years setting during the period of national restrictions. There are legitimate reasons why it may be appropriate for a whole household to remain at home, and where law or guidance requires a member of the family to stay at home. Other reasons would need to be considered on a case-by-case basis with reference to the restrictions placed on people by the new coronavirus (COVID-19) regulations. A contract term which requires payment even where no service is being provided by the nursery or cannot be legally accessed by the consumer is likely to be unfair, as are terms which require extensive notice periods.

Each case needs to take account of individual contracts considered from the perspective of both parties and the application of the law and guidance to both providers as businesses and parents as consumers. The general principle is that providers should not charge parents or carers for services that cannot be provided. If there is a barrier to accessing childcare, based on government guidance or the law, the provider should not charge the parents or carers for this period. For example, from 28 September people in England are required by law to self-isolate if they test positive for coronavirus (COVID-19) or are contacted by NHS Test and Trace. Accordingly, if a child is self-isolating having been contacted by NHS Test and Trace, the provider should not charge the parent or carer for this period.

### Data collection: Monitoring of early years and childcare provision during coronavirus (COVID-19)

We launched a data collection process in April 2020 to ensure there is up-to-date information on early years and childcare provision during coronavirus (COVID-19).

We have published summaries of attendance in education and early years settings during the coronavirus (COVID-19) outbreak.

We will:

- continue to run the early years and childcare data collection until further notice to ensure that we have information on how many children are accessing provision and if there are sufficiency issues
- keep the frequency and end date of the data collection under review

All local authorities have received information on how to access the data collection, the frequency of collection and how to contact us with any queries.

We have asked Ofsted to monitor which providers on the early years register are open or closed. The information Ofsted is seeking from registered early years and childcare providers during coronavirus (COVID-19) will give the setting-level data it requires to fulfil its safeguarding requirements as the regulator.

We understand that most local authorities are already collecting the data requested, so, in the majority of cases, providers will not need to do anything different or new. The Ofsted data collection does not duplicate the data that we are requesting from local authorities and should not place an ongoing reporting burden on providers.

## Safeguarding and welfare

Children may be experiencing a variety of emotions in response to coronavirus (COVID-19), such as anxiety, stress or low mood. This may particularly be the case for vulnerable children, including those with a social worker. It is important to contextualise these feelings as normal responses to an abnormal situation.

The safeguarding and welfare requirements in the Early years foundation stage (EYFS) still apply, including requirements relating to child protection arrangements. It is a legal requirement that settings must continue to take all necessary steps to keep children safe during this period and have regard to the statutory guidance on working together to safeguard children. For detailed information on the EYFS disapplications that can be used by settings during COVID-19, read the disapplications guidance.

Settings should also provide more focused support where issues are identified that individual children may need help with, drawing on external support where necessary and possible. Settings should also consider support needs of particular groups they are already aware of needing additional help (for example, children in need), and any groups they identify as newly vulnerable. To support this, settings may wish to access the free resource MindEd learning platform for professionals, which contains materials on peer support, stress, fear and trauma, and bereavement.

MindEd have also developed a coronavirus (COVID-19) staff resilience hub with advice and tips for frontline staff.

Where there is a concern that a child is in need or suffering or likely to suffer from harm, the early years setting (generally led by the designated safeguarding lead or deputy) should follow their child protection policy. Consider any referral to statutory services (and the police) as appropriate.

## Reviewing and updating child protection policies

You must continue to have regard to the statutory safeguarding guidance. Settings should consider whether any review of their child protection arrangements is needed as a result of coronavirus (COVID-19).

The designated safeguarding lead should continue to co-ordinate with children's social care, the local three safeguarding partners and other agencies and services to identify harm and ensure children are appropriately supported.

All staff and volunteers should be made aware of new safeguarding policy and be kept up to date as it is revised.

## Changes to the role of the safeguarding lead

It is a legal requirement that settings must continue to have a practitioner designated to take lead responsibility for safeguarding. It is acceptable for the safeguarding lead not to be based on-site if this is not practical, for example, they may be working from home or be based at another setting, as long as they are still available to provide support, advice and guidance to staff. It is important that all childcare staff and volunteers have access to a designated safeguarding lead practitioner and know on any given day who that person is and how to speak to them.

## Keeping children safe online

Settings should continue to consider what strategies they are using to keep children safe online during this period, including:

- checking apps, websites and search results before using them with children
- supervising children when accessing the internet

Further details can be found in safeguarding children and protecting professionals in early years settings: online safety guidance for practitioners. This advice is also relevant for parents and carers.

## Supporting children's mental health and wellbeing

Staying at home for a prolonged period and the change of routine may cause difficulties for some children, such as changes in behaviour or mood.

As more children return to settings, settings should:

- consider the mental health, pastoral or wider wellbeing support children may need, including with bereavement
- how to support them to transition into the setting after a long period of absence
- in some cases, increased welfare and safeguarding risks

This may lead to an increase in social, emotional and mental health concerns, particularly for vulnerable groups such as:

- children with a social worker

- previously looked-after children who left care through adoption or special guardianship

Settings may want to refer to guidance for parents and carers on supporting children and young people's mental health and wellbeing during the coronavirus (COVID-19) pandemic. These children may need additional support and access to services such as educational psychologists, social workers and counsellors. Staff may require appropriate instruction and training on identifying and supporting vulnerable children and parents and carers that return to the setting. For example, by signposting them to appropriate local services such as mental health, domestic abuse or substance abuse services. Providers should contact their local authority to understand what support is available and agencies and providers should work together to actively look for signs of harms as appropriate.

### Supporting children with SEND after time out of the setting

Particular care is needed when supporting children with Special Educational Needs (SEND) with a return to their setting. Re-adjustment to the routines in a setting may prove more challenging for some children with SEND than others, and consideration and planning will need to be given.

Settings should be alert to the fact that there may be children:

- with additional or worsened social, emotional and mental health needs as a result of coronavirus (COVID-19)
- who have fallen further behind their peers as a result of time out of childcare settings, or missed diagnosis as a result of a period of absence

You will need to ensure you have the staffing needed to support children with SEND at safe ratios and that you have a member of staff designated as a SENCO, interim SENCO or a named individual with oversight of special educational needs provision for children with SEND.

## Early years foundation stage and reforms

### Application and disapplication of the early years foundation stage framework

The Early years foundation stage (EYFS) statutory framework sets the standards that schools and childcare settings must meet for the learning, development and care of children from birth to 5 years old.

Early years settings can use specific temporary EYFS disapplications if coronavirus (COVID-19) restrictions prevent them delivering the EYFS as normal.

Details of the temporary changes, which cover aspects of learning and development, assessment and safety requirements (including paediatric first aid) can be found in the guidance on EYFS: coronavirus disapplications. Settings and local authorities should fully familiarise themselves with this guidance.

### Planning for and supporting children's learning

Where children are new to the setting, or re-joining after time away, priority should be

Where children are new to the setting, or re-joining after time away, priority should be given to helping them adapt to their new routines and resettle, especially where there has been staffing or other significant changes.

Settings may want to:

- consider how stories, singing and games can be used to help children settle into new everyday routines
- plan how children can learn in age-appropriate ways about how they can keep themselves safe, including regular handwashing and using tissues
- consider how to encourage children to learn and practise these habits through games, songs and repetition

Settings can refer to the following helpful resources:

- Professional association for children and early years (PACEY): supporting children in your setting
- Dr Dog explains coronavirus
- 2 metres apart activity
- Our hand washing song
- Talking to children about COVID-19 (novel coronavirus)

As set out in the sections on disapplications in the early years foundation stage framework, unless a setting is using the temporary EYFS disapplications , the learning and development and assessment requirements must legally be met.

Where settings are using the temporary EYFS disapplications, they may wish to focus on supporting communication and language and the prime areas of learning in the EYFS.

## EYFS reforms

We have published the government response to the consultation on EYFS reforms. This response confirms what changes will be made to the EYFS.

An early adoption year is underway with primary schools that volunteered to make the changes in 2020 to 2021, ahead of statutory rollout to all early years settings in the 2021 to 2022 academic year.

## Postponement of the statutory implementation of the reception baseline assessment

In response to the impact of coronavirus (COVID-19) on schools, the statutory implementation of the reception baseline assessment has been postponed until the 2021 to 2022 academic year. Instead, schools were invited to take part in an early adopter year, which took place in the second half of the 2020 autumn term to familiarise themselves with the assessment and training materials before the reception baseline assessment becomes statutory.

## 2021 Early years foundation stage profile (EYFSP)

Teachers and early years practitioners should use their best endeavours to still complete the EYFSP for children in the summer term, if at all possible, and to provide this important information to parents and to year 1 teachers, should the situation at the time allow.

This will be a judgement for schools and teachers depending on their individual circumstances Schools who decide they are able to complete the EYFSP this year and provide this information to parents and year 1 teachers will not be subject to statutory external moderation. There will be no requirement to submit data to the local authority or to confirm whether they have completed the EYFSP to the DfE.

## Requirements for Paediatric First Aiders (PFA) being on site

As set out in the sections on disapplications in the early years foundation stage framework, unless a setting is using the new regulations to disapply elements of the EYFS due to further local or national coronavirus (COVID-19) restrictions, providers must legally ensure a member of staff with a full PFA certificate is on site at all times when children are present, as set out in the EYFS.

## Renewing paediatric first aid (PFA) certificates

If PFA certificate re-qualification training is prevented for reasons associated directly with coronavirus (COVID-19), or by complying with related government advice, the validity of current certificates can be extended to 31 March 2021 at the latest. This applies to certificates which expired on or after 1 October 2020 and includes paediatric first aiders in provision registered on the General Childcare Register and all early years provision. If asked to do so, providers should be able to explain why the first aider has not been able to re-qualify and demonstrate what steps have taken to access the training. Employers or certificate holders must do their best to arrange requalification training at the earliest opportunity.

## Varying staff to child ratios and qualifications

Paragraph 3.30 of the EYFS states 'Exceptionally, and where the quality of care and safety and security of children is maintained, changes to the ratios may be made.'

We consider the extent of coronavirus (COVID-19) to be an exceptional temporary circumstance in which the staff to child ratios set out in the EYFS can be changed if necessary. Early years settings and schools, however, remain responsible for ensuring the safety and security of children in their care. Amendments made to regulations allow in certain circumstances for further exceptions to be made to the qualification level that staff hold in order to be counted in the ratio requirements. For more detail, read EYFS: coronavirus disapplications.

## Advice on separate baby room requirements for children under the age of 2 years

The EYFS requirement to have a separate baby room is a safety issue for the protection of very young children particularly when they are asleep. Paragraph 3.59 of the statutory framework for the EYFS already allows for the mixing of children when this is appropriate. If the layout of the premises does not allow for a separate 'baby room' with its own door, a suitable area may be partitioned off to provide safety for younger children.

## Taking on new staff (including volunteers) even if a Disclosure and Barring Service (DBS) check has not been completed

The requirements set out at paragraph 3.11 of the EYFS remain in place.

Settings must obtain criminal records checks for new members of staff including volunteers. If an application has been made but the DBS disclosure has not arrived new staff and volunteers can still care for children provided they are supervised by someone who has a DBS check. Under no circumstances can an unchecked member of staff be left alone with children.

Where new staff are recruited, or new volunteers enter the early years setting, they should continue to be provided with a safeguarding induction.

## Enhanced DBS checks for staff moving temporarily to another early years setting

Where members of the early years and childcare workforce are already engaging in regulated activity and already have the appropriate DBS check:

- there is no expectation that a new DBS check should be obtained for them to temporarily move to another setting to support the care of children
- the onus remains on the receiving setting to satisfy themselves that someone in their setting has had the required checks – this requirement can be satisfied by seeking assurance from the current employer rather than requiring new checks

# Ofsted

## Notifications requirements for settings providing childcare

We have asked Ofsted to work with us and with local authorities to find out which early years providers, including childminders, are open or temporarily closed.

This means that Ofsted requires further information about whether some providers are open or closed. If your operating circumstances change (that is, you open or close):

- let Ofsted know by sending an email to enquiries@ofsted.gov.uk with 'change in operating hours' in the subject field
- in the body of the email, confirm the unique reference number for each setting and the details of the change - the URN can be found on the setting's registration, inspection report(s), and Ofsted reports page
- in addition, any confirmed cases of coronavirus (COVID-19) in the setting (either child or staff member must be swiftly reported to Ofsted (or the childminder agency with which you are registered) through the usual notification channels. If the setting has been advised to close as a result, this must also be reported to Ofsted. This is a legal requirement

## Resuming Ofsted inspections

The Secretary of State for Education announced the suspension of routine Ofsted inspections on 17 March 2020. On 29 March 2021, Ofsted announced plans to return to on-site EIF inspections of registered early years providers from 4 May 2021. You can find out more about Ofsted's return to graded inspections on Ofsted: coronavirus COVID-19 rolling update.

## Ofsted action on unregistered provision

The health, safety and wellbeing of children is our first consideration, and the government continues to expect childcare to take place only within registered settings.

Read Ofsted's response to coronavirus (COVID-19) in Ofsted: rolling update for more information.

# Additional guidance for childminders

## Childminder eligibility for the Self-employment Income Support Scheme

Eligibility for the scheme is based on employment structures and not professions. Find out more from the self-employment income support scheme.

## Childminders working with other childminders to look after more children together

Up to 3 registered childminders (or a mix of up to 3 registered childminders and assistants) can work together in the same domestic premises. If:

- more than 3 childminders work together they will need to apply to Ofsted to register childcare on domestic premises
- registered to deliver childcare on domestic premises, 4 or more childminders (or a mix of 4 or more childminders and assistants) can work together in the same domestic premises, which would enable them to care for larger groups of children and still meet ratio requirements

Find out more from requirements for childminders and childcare on domestic premises

## Quality assurance visits

The Parliamentary Under Secretary of State for Children and Families, Vicky Ford MP, wrote to Ofsted's Chief Inspector about supporting childminder agencies to retain their registration where the minimum number of quality assurance visits required has not been met as a result of coronavirus (COVID-19). This will ensure that childminder agencies (and their childminders) can continue to adhere to the government's guidance on protective measures and reduce external visitors.

The safeguarding responsibilities of childminder agencies (CMAs) and their childminders have not changed. CMAs must continue to prioritise visits to any of their registered childminders if they have concerns about the quality of a provider or wish to check any registered non-domestic premises (as set out in section 3.4 of Childminder agencies: a guide).

From 4 May, all CMAs will be expected to resume their quality assurance visits – if they are not already doing so – and comply with the legal requirements of their registration to carry out the relevant minimum number of quality assurance visits to their registered childminders every year.

This is alongside Ofsted's plans to return to on-site EIF inspections of its registered early years providers from 4 May 2021 (as announced on 29 March 2021). Further information for CMAs is available in childminder agencies undertaking visits during COVID-19.

## Childminder with household member self-isolating

**Household member self-isolating due to contact with a confirmed case of coronavirus (COVID-19)**

This advice applies where a childminder usually looks after children in their own home, and where a childminder's household member is self-isolating. If this is:

- only as a result of coming into contact with a positive case and that positive case is not normally or currently resident in the childminder's house
- the household member is not showing symptoms of coronavirus (COVID-19)
- the household member does not require a test

The childminder can continue to provide childcare at their registered setting. The childminder should ensure they keep open communication with parents and carers of children attending the setting about the self-isolation.

The household member who is self-isolating must not have any contact with the children being cared for in the setting. For example, the person isolating must use a separate bathroom where possible. If the person self-isolating has to use a shared bathroom or other communal areas, these must be thoroughly cleaned after every use.

The childminder must:

- comply with health and safety law, which requires a risk assessment. The risk assessment must demonstrate that the provision of childcare in their setting is safe and aligns with the system of controls. Further guidance can be found on COVID-19: cleaning in non-healthcare settings outside the home
- put in place proportionate control measures - for more information on what is required of employers in relation to health and safety risk assessments, please read Annex A: health and safety risk assessment

The childminder should:

- thoroughly review their health and safety risk assessment

- have active arrangements in place to monitor that the controls are effective, working as planned, and updated appropriately (for example when any issues are identified, or when there are changes in public health advice)

Further guidance on risk assessments and keeping children and staff safe can be found in the section on risk assessments and the system of controls

**Household member self-isolating due to testing positive for coronavirus (COVID-19)**

This advice applies where a childminder usually looks after children in their own home and a member of the childminder's household, (including their support or childcare bubble if they have one), has tested positive for coronavirus (COVID-19).

The childminder should also take the necessary action for responding to and reporting confirmed cases of coronavirus (COVID-19) in the setting, as set out in the system of controls.

A childminder cannot care for children in their home because all household members must self-isolate. Their isolation period includes the day the first person in their household's symptoms started (or the day their test was taken if they did not have symptoms) whether this was a lateral flow device (LFD) or polymerase chain reaction (PCR) test and the next 10 full days. A positive LFD test should be followed up by a lab-based PCR test to confirm the result. If the PCR test is negative, it overrides the self-test LFD test and the childminder can return to work. Those with a negative LFD test result can also continue to work and use protective measures.

They should follow the stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection.

The childminder cannot restart minding children until all household members have finished isolation and/or sickness periods whichever is the longest.

# Entitlement funding

## Early years entitlement funding for local authorities

We have published revised guidance on the use of free early education entitlements funding during coronavirus (COVID-19) which provides further details on how we expect local authorities to fund early years settings and how local authorities will be funded for the 2021 spring term and the financial year 2021-22.

We have also published technical guidance for local authorities setting out the process for accessing funding for the 2021 spring term and how they will be funded for the financial year 2021 to 2022.

## Temporary changes to parents and carers eligibility to the 30 hours free early education entitlement and tax-free childcare

Further information is available on changes to 30 hours free childcare and Tax-Free Childcare during the COVID-19 pandemic.

We would encourage all eligible parents to continue to apply for, and reconfirm, their childcare entitlements during this time, even if children are temporarily not taking up their childcare place.

# Insurance of early years providers during coronavirus (COVID-19)

## Business interruption insurance

For childcare providers which have a policy that covers government-ordered closure and unspecified notifiable diseases, the government's social distancing measures may be sufficient to allow businesses to make a claim against their insurance, provided the other terms and conditions in their policy are met.

The Financial Conduct Authority (FCA) rules require insurers to treat customers fairly, including:

- handling claims fairly and promptly
- providing reasonable guidance to help a policyholder make a claim
- not rejecting a claim unreasonably
- settling claims promptly once settlement terms are agreed

The government is working closely with the FCA to ensure that the rules are being upheld during this crisis and fully supports the regulator in its role. The Association of British Insurers (ABI) and its members have agreed a set of principles for handling business interruption claims to support and provide clarity to customers.

## Public liability insurance

It is a legal requirement that providers must carry the appropriate insurance (for example, public liability insurance) to cover all premises from which they provide childcare, including childminding. Nurseries should check the terms and conditions of their public liability insurance policies and consult with their insurance providers and brokers to determine their coverage for coronavirus (COVID-19). For general advice on insurance matters (but not on specific policies) including those related to coronavirus (COVID-19), the ABI can be contacted by telephone on 020 7600 3333 or email at info@abi.org.uk.

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## Coronavirus (COVID-19)

Coronavirus (COVID-19): guidance and support

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