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| 1. What do I do if a member of staff or a child who attends develops symptoms whilst at the setting? | If anyone becomes unwell with a new continuous cough, a high temperature or a loss of or change in their normal sense of taste or smell they must be sent home as soon as possible.    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 of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. 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 should be cleaned and disinfected using standard cleaning products before being used by anyone else.    PPE should be worn by staff caring for the child while they await collection ONLY if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).    If a 2 metre distance cannot be maintained, then the following PPE should be worn by the supervising staff member: Fluid-resistant surgical face mask    If direct contact with the child is necessary, and there is significant risk of contact with bodily fluids, then the following PPE should be worn by the supervising staff member 1) Disposable gloves 2) Disposable plastic apron 3) Fluid-resistant surgical face mask 4) Eye protection (goggles, visor) should be worn ONLY if a risk assessment determines that there is a risk of fluids entering the eye from, for example, coughing, spitting or vomiting    The setting should record and keep the details of the incident in case it is needed for future case or outbreak management.  If a member of staff has helped an unwell child, the guidance states that they should wash their hands thoroughly for 20 seconds afterwards, but that they are not required to go home unless they develop symptoms themselves or the child subsequently tests positive for coronavirus.  Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.”  If a child or staff member is seriously ill, 999 should be called.  There is no need to notify the Local Authority or the Health Protection Team of the incident |
| 1. What do I do if a child or member of staff develops symptoms whilst not at the setting? | Anyone who develops symptoms of COVID-19, or whose household member develops symptoms, should immediately self-isolate. They should not attend the setting and should follow the steps below:    1) Parent/Carer or staff member should notify the setting of their absence by phone    2) Setting should record and keep minimum dataset: Reason for absence, date of onset of symptoms, symptoms, key group/ room/ bubble etc.    3) Direct to Stay at home guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 10 days starting from the first day of their symptoms and the rest of their household for 14 days.    4) Advise that the child/staff member should get tested via Bury Council Website, NHS UK or by contacting NHS 119 via telephone if they do not have internet access. This would also apply to any parent or household member who develops symptoms.  5) There is no further action required by the setting at this time, and no need to notify the Local Authority or Health Protection Team. |
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| 1. **Home based child carers only** - What do I do if a household member is told to self-isolate by track and trace / school / other setting? | If someone in your household is asked to self-isolate because they may have had contact with a person who has tested positive, the other people within the household would not need to isolate at this point, unless they then develop symptoms.  Therefore, if you’re a childminder, at this point you wouldn’t need to close. However, at the time of the incident test and trace should activate and it is most likely that you would be contacted by the local health protection team if they felt you needed to close.  You will need to complete a risk assessment and communicate with parents about what is happening and precautions you are taking to ensure your provision can continue to operate safely.  Each situation would be unique and the risk would have to be assessed on a case by case basis by the Infection Prevention and Control team. For example, if a school had a large outbreak, then it may be necessary for you to close. |
| 1. **Home based child carers only** -What do I do if a member of my household develops symptoms? | If a member of your household (adult or child) presents symptoms you must self-isolate them and arrange for a test as soon as possible.  You can continue to operate your provision but you will need to complete a risk assessment and communicate with parents about what is happening and precautions you are taking to ensure your provision can continue to operate safely.  If the test result is negative you can continue to operate. If the test results are positive, you will need to inform Infection Prevention and Control Public Health team who will advise of the action you need to take. You will have to close your setting in order to self-isolate.  OFSTED and Bury early years team will need to be informed. Please refer to Positive Covid 19 Flow Chart for Early years settings. |
| 1. “A child presents with an upset tummy. I exclude for 48 hours under normal infection control procedures. Can I insist on a Covid – 19 Test being undertaken?” | What are the symptoms? The main symptoms of COVID-19 are:   * new continuous cough and/or * fever (temperature of 37.8°C or higher) * Loss of or change in, normal sense of taste or smell (anosmia)     Children may also display gastrointestinal symptoms.  Under the current guidelines, only individuals with COVID 19 symptoms should get tested. If the parents of the child are concerned, they should contact their GP for further advice. |
| 1. What do I do if I have staff off due to self-isolation/ Covid positive etc., How can I manage my setting and what risks are there to changing/ removing bubbles? | As in normal circumstances you must have a contingency plan for emergency staffing in the instance of staff absence. You will need to think about how you can continue to staff the setting but minimise the contact between many different children and staff.  You do not need to operate in bubbles although this is good practise. If you need to operate outside of the bubbles consider how you can keep consistency of staff as much as possible. Consider your hygiene procedures.  Agency Staff: The DfE guidance says: *“*Where possible, the presence of any additional members of staff should be agreed on a weekly basis, rather than a daily basis to limit contacts”. |
| 1. If staff or children at the setting have been in contact with someone else at the setting who have tested positive for Covid and told to self-isolate, do their household members have to self-isolate as well? | No.  DfE guidance states that: “Household members of those who are sent home do not need to self-isolate themselves unless the child or staff member who is self-isolating subsequently develops symptoms.”  Staff may need to stay at home to look after their self-isolating child (ren) therefore as a provider you will need to continue to consider how you will staff the setting in line with the EYFS ratios. |
| 1. What do I do if a parent informs me that their child has been seen by paramedics in an emergency situation and taken to hospital, due to coronavirus symptom but has been told it is not coronavirus but not offered a test? Can I ask them to have a test before they return to the setting? | If a child displays any of the symptoms the setting must:   1. Setting should record and keep minimum dataset: Reason for absence, date of onset of symptoms, symptoms, key group/ room/ bubble etc.      1. Direct to stay at home guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 10 days starting from the first day of their symptoms and the rest of their household for 14 days.      1. Advise that the child/staff member should get tested via Bury Council Website, NHS UK or by contacting NHS 119 via telephone if they do not have internet access. This would also apply to any parent or household member who develops symptoms.   Therefore you may ask the family to have a test before returning to the setting or ask them to self-isolate for 14 days from the start of the symptoms. |
| 1. Are children able to attend more than one setting? | Yes.  Although this should be avoided where possible. The DfE guidance says: *“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.”* |
| 1. Are staff allowed to work two jobs and if so do they need to change clothing in between? | The DfE guidance says: *“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 staff do attend more than one setting, the DfE has confirmed that changes of clothes is *“something for individual settings to considering and to include in their risk assessment”.* The Department added that *“There is no need for anything other than normal personal hygiene and washing of clothes following a day in a childcare setting.”* |
| 1. Do parents need to provide evidence that their child has tested negative for coronavirus before their child is allowed to return to the setting if they have been self-isolating? | No.  DfE guidance states that: “Settings 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.” |
| 12) How do I manage continuous provision activities?  13) Am I allowed to do baking/ cooking activities? | Government guidance states that all planned activities should be risk assessed in light of coronavirus, in conjunction with relevant staff where applicable, and due consideration given to how usual practice may need to be adapted.  Malleable resources, such as play dough, should not be shared between groups and public health advice is that, as sand pits cannot be thoroughly cleaned between uses, they should not be used at this time. Consider how resources can be used safely and in which circumstances and which items it might be more practical to remove during this time.  There is no reason that you cannot undertake baking or cooking with the children as you would do normally under the EYFS, but please consider a thorough risk assessment to ensure that the activity is Covid- 19 secure. For example Children follow good hygiene practises such as washing hands, wearing aprons, hats etc. Ensure they use their own utensils and do not share ingredients - not touching/passing round ingredients. Items cooked should only be eaten by the children who made them and at this time not sent home for family members etc. Of course all utensils and areas used for cooking should be cleaned down using a household disinfectant. |
| 14) When will OFSTED inspections be re –starting? | Ofsted inspectors will start undertaking some regulatory activity to providers who have been judged ‘inadequate’ or ‘requires improvement’ and have associated actions to fulfil in the autumn term. These visits will not result in a judgement, but Ofsted will publish a short summary to confirm what it found during the visit.  Routine early years inspections are expected to restart from January 2021, although the exact timings are being kept under review. |
| 15) Can I invite back external providers e.g. Diddikicks, BabyBallet. | It depends on the provider. The Department for Education has said that for non-staff members like speech and language therapists or counsellors, “settings should assess whether the professionals need to attend in person or can do so virtually” and that “if they need to attend in person, they should closely follow the protective measures guidance, and the number of attendances should be kept to a minimum.”  The guidance adds that where possible, the presence of additional members of staff should be agreed on a weekly basis, rather than a daily basis to limit contacts.  However, the Department has said that sessions delivered by external providers which are not directly required for children’s health and wellbeing “should be suspended”. |
| 16) Are Early Years students still allowed to attend settings for the purposes of student placements? | The Department for Education has told us that the decision on allowing students to attend work placements rests with employers, who are responsible for meeting the safe working and other requirements.  They stated that: *“We recognise that there are likely to be challenges for the training and assessment of EYE and EYP qualifications in 2020/21 academic year due to COVID-19. We have worked with awarding organisations to agree that for level 3 EYE and  level 2 EYP training and qualifications:*  *Placement hours will be managed pragmatically with the overarching consideration being that the EYE criteria or EYP criteria, as appropriate, have been met during the learners time on the programme*  *In order to ensure the EYE or EYP criteria have been met, internal assessments may be adapted; appropriate alternative assessment methods will be evidenced i.e. direct observation where possible or professional discussion, witness testimony, etc.”* |
| 17) Can we take children out on trips to the park and other public spaces? | Yes.  The Department for Education guidance states that:  “Settings should maximise use of private outdoor space, while keeping small groups of children and staff away from other groups.  “Childminders and early years providers may take small groups of children to outdoor public spaces, for example parks, provided that a risk assessment demonstrates that they can stay 2m away from other people at all times.  There are exceptions where groups can be larger than 6 people. These include:   * registered childcare, education or training |
| 18) My paediatric first aid certificate will expire within the next three months. What should I do? | The government has confirmed that: "If PFA certificate requalification 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 25 November 2020 at the latest. This applies to certificates which expired on or after 16 March 2020.” |
| 19) A child has displayed symptoms and EYs setting have followed PHE advice to advise isolation for 14 days or test.  Parent chooses to purchase an online test kit from a private company.  Can the EYs setting accept a non-NHS test result? | No. Although there are many companies that provide COVID19 testing services, it is hard to determine their reliability, standard procedures and quality control, therefore, they should not be used in this context.  Only results provided from tests arranged via the NHS 119, [Bury council website](https://www.bury.gov.uk/index.aspx?articleid=15451), other NHS providers and PHE should be accepted. |
| 20) Drive through and mobile testing units are only appropriate for over 3s. Where can I get my child who is under 3 tested? | Call 119 for advice or visit the Bury Council website for up to date test centre information and to book a test:  <http://www.bury.gov.uk/coronavirus>  **Direct link for Under 3s:**  <https://www.bury.gov.uk/index.aspx?articleid=15451> |
| 21) Can a home based child carer meet up in a park/play centre/home with other home based child carers? | No.  ‘From 20 July, early years settings are no longer required to keep children in small, consistent groups within settings but can return to normal group sizes. Settings should still consider how they can minimise mixing within settings, for example where they use different rooms for different age groups, keeping those groups apart as much as possible.’ |
| 22) Do EY’s settings need to display a QR Code for the sake of ‘Track and Trace’ procedures? | No.  EY’s settings **do not need** to display a QR code. EY settings can however decide to do so if they so wish if they want to protect the business and staff. Applications for this can be accessed on line. <https://www.gov.uk/create-coronavirus-qr-poster> |
| 23) At present ‘Rapid Lateral Tests can be ordered for companies with more than 50+ employees, is there any indication of such testing being available for smaller settings in the future? | Staff in school-based nurseries and maintained nursery schools will be supplied with lateral flow device (LFD) test kits to self-swab. Staff will be asked to take their test kits home and carry out the test twice a week. See guidance on asymptomatic testing in primary schools and nurseries. From 22nd March, 2021- The asymptomatic testing programme in education will expand to staff in all private, voluntary and independent nurseries, who will start to receive deliveries of lateral flow device (LFD) home testing kits to offer to all their staff for twice weekly testing.  At present Bury NHS CCG are looking to see if they can expand the community asymptomatic testing programme for registered childminders in Bury and offer more accessible testing sites. We are waiting to hear if this is possible.  Expanding home testing kits to these settings will help to identify positive cases more quickly and break the chains of transmissions.  Community testing programmes are currently being rolled out across the country. They are led by local authorities and provide asymptomatic testing through testing sites based in the local community. Critical workers who have to leave home to work during national restrictions, such as early years and wraparound childcare staff, and those who cannot access asymptomatic testing through other routes, are being prioritised for community testing where possible. |
| 24) There has been a lot of confusion recently regarding whether EY practitioners are actually eligible for the Covid-19 vaccination, with many people being able to book the vaccination, but then being turned away when they go to receive it! Information now suggests that this was an error, and the vaccine is not currently available to the EY sector as of yet! When will EY’s Practitioners as Key Workers be eligible for the Covid-19 vaccine? | Bury Council, CCG, GPs and others are working hard towards the goal set by Government to offer at least one dose of a COVID-19 vaccine to every adult by September and are making good progress. However, vaccine supply is limited and is likely to remain limited for some time. Because the risk of death from COVID-19 varies so much between people, the order in which people get vaccinated will affect how many people die from COVID-19 in the coming months. This order is decided by the independent Joint Committee on Vaccination and Immunisation (JCVI). Their advice is designed to save the most lives possible as the vaccine programme is rolled out. Vaccinating people outside of this ordering is risks causing avoidable harm and death.  Bury Council is supporting the CCG and GPs to connect organisations with staff who fall in the JCVI eligibility groups and connect them to vaccination providers as quickly as possible. There are a wide range of professional and other groups who are understandably very keen to get vaccinated against COVID-19, but who are not yet eligible. Bury Council, CCG, GPs and others involved in the vaccination programme are under pressure to expand vaccination to these groups, many of whom have sensible arguments for being vaccinated even though those arguments are not stronger than those groups set out by the JCVI.  To make sure that the vaccination programme in Bury saves as many lives as possible decisions about which groups fall within the JCVI cohorts must be made with careful reference to the JCVI guidance and be consistent with the approach taken nationally and in GM.  As soon as anything changes with regard to eligibility, the sector will immediately be informed. |
| 25) Can under 2’s who are asymptomatic have a Lateral Flow Test? | No, younger children should not be Lateral flow tested, only secondary school children and adults. |

We appreciate all cases are induvial and if you wish to discuss further please contact:

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