

COVID-19 Childcare - Guidance for Childminders

Version History: V6 – 9 July 2020

Introduction

1. The first aim of the partial closure of childcare settings has been to reduce the overall population of children and families moving around local areas as far as possible, in order to reduce the number of social interactions and thus flatten the upward curve of the coronavirus outbreak. The second aim was to continue to care for priority children – those who are vulnerable, or whose parents are critical to the coronavirus response, so that they can continue to work. Due to the huge efforts of people to adhere to social distancing and the success of lockdown measures the transmission rate of coronavirus has decreased.
2. The Executive has therefore been able to take further steps towards the full recovery of the childcare sector, in line with the Childcare Sector Recovery Plan (available at: <https://www.education-ni.gov.uk/faqs-childcare-recovery-plans-24-june-2020>). The full implementation of the Plan will depend on the continued progress in the fight against COVID-19. Implementation must be staged in order to minimise the chance of infections increasing again. Please note that this guidance is for Childminders. It will be updated regularly and available on <https://www.familysupportni.gov.uk/Support/91/covid19-childcare-options-and-associated-guidance>. Please consult the FSNI website at regular intervals.
3. The Guidance is intended to be helpful to providers, parents and children. Our aim is to support children when they are in settings. Nurturing and attached relationships are essential to creating the conditions for children to flourish in in childcare. Children also have the right to the best possible health, with their best interests a top priority in all decisions and actions that affect them. Adults, of course, also have fundamental rights in relation to their health and wellbeing.
4. It is acknowledged that social distancing of young children is not always possible. It is important for children to feel secure and receive warmth and physical contact that is appropriate to their needs, in particular when they are receiving personal care, need comforting or reassurance. Childminders will need to be close to the children, particularly young children, and should feel confident to do so. This includes feeling confident to continue to hug children in line with their needs.
5. The objective of the Childcare Sector Recovery Plan is to restore the childcare sector to pre-COVID-19 capacity levels as quickly and safely as possible. Under the plan, the link with the definition of keyworker will be broken from 29 June 2020. Instead, the aim will be to ensure that any parents can access childcare as and when they need it, including those parents who are working from home. **You**

will therefore no longer need to consider a parent's occupation before offering their child a place.

6. In order to keep children and providers safe, it is considered necessary to continue to place a level of operating restriction on childcare settings. From 29 June, you must not provide childcare for more than 4 families at any one time, and you are still required to adhere to the guidance relating to COVID-19 in this document. All of this will be kept under review and may be subject to change, depending on medical and scientific advice.

7. Information and support continues to be available from the Northern Ireland Childminding Association and Employers For Childcare:

The Northern Ireland Childminding Association (NICMA) is a registered charity and membership organisation to support and develop registered childminding for the benefit of children, families and communities. NICMA will, in particular, be able to provide support with applications to the COVID-19 Childcare Sector Support Scheme.

<https://nicma.org>

Tel: 028 9181 1015

Email: info@nicma.org

Employers For Childcare is a registered charity aimed at removing the barrier that a lack of affordable, quality childcare presents to working parents. The charity encourages employers to implement family friendly policies in the workplace and also offers a free, confidential and impartial advice and information Freephone helpline.

<https://www.employersforchildcare.org/>

Tel: 028 9267 8200

Freephone: 0800 028 3008

Email: hello@employersforchildcare.org

Information on COVID-19 and children

8. The current evidence suggests that children seem generally less likely to catch the infection and are not more likely than adults to spread infection to other people. Children have rarely been the first within a household to catch the virus when household spread has occurred. Children appear more likely than adults to have mild or no symptoms. Symptoms in children include a cough, fever (temperature of 37.8 or higher), runny nose, sore throat, diarrhoea and vomiting. It is important for parents and childminders to accept that no interpersonal activity is without risk of transmission of infection, but public health advice is that reopening on a phased basis and under certain conditions is now appropriate.

Therefore there are a number of measures you will be required to put in

place to enable you to operate as safely as possible in the interests of children and those who care for them [see below].

Vulnerable Children

9. Childcare should be provided for any vulnerable child, if a HSC Trust Early Years Team determines that it is in the child's best interests.

Financial support

10. Financial support for the childcare sector from 1 July 2020 will be subject to Executive agreement and the availability of funding. More information will be published in the coming weeks.

Childminders Wishing to Resume Business - Process

11. If a childminder wishes to resume business, they must first inform the local HSC Trust Early Years Team of their intention to do so. HSC Trust Early Years Teams can then end the temporary "pause" put on the childminder's registration when they ceased working due to COVID-19. From 29 June 2020, childminders will be able to provide childcare for up to 4 families at any one time (from a maximum of 3 previously). The intention is to raise the maximum number of families further in August to 5. This will be subject to medical and scientific advice. The current limit is intended to reduce the risk of transmission between households.
12. Parents have been advised to check the Family Support NI website for the latest availability of childminders and daycare providers in their area. To ensure that parents are receiving the latest information, it is crucial that you inform the HSC Trust Early Years Team who will then inform the Family Support NI website team that you are open and caring for children. Parents will then be able to contact you about any vacancies that you may have.

Minimum Standards - Ratios

13. Childminders must continue to comply with the Department of Health Minimum Standards as they relate to ratios, that is, with the specified maximum number of children who may be cared for as identified on the Registration Certificate. This number includes their own children under 12 years of age. The ratios are:
 - 1:6 – six children under 12, of whom no more than 3 are under compulsory school age;
 - Normally no more than 1 child under a year old.

In accordance with the Minimum Standards, where the childminder employs an assistant the same ratios must be met for any additional children, and arrangements must comply with the Trust's registration decisions regarding the ages and total number of children, up to a maximum of 8.

Children between the ages of 12 and 14 can be cared for by a childminder for remuneration. The Trust should take into account any such children when agreeing ratios for children being cared for under the age of 12 years. In these situations the Trust may at their discretion decrease the total number of children aged less than 12 years that can be cared for by the childminder. This decision will depend on a number of factors, including the ages and needs of the children under 12 years of age and the number of children aged between 12 and 14 in the household.

Infection Control

14. It is acknowledged that childminders have practices already in place in relation to infection control, and must keep up-to-date with current advice on COVID-19. Childminders should complete the COVID19 Infection Control Training on <https://www.familysupportni.gov.uk/NewsStory/100/covid19-infection-prevention-and-control-training>. We also encourage childminders and parents to discuss any concerns they have together and agree appropriate safety procedures where these are not specifically contained within any official guidance. It may be helpful for you to discuss this guidance with parents, and the guidance specifically for parents on the FamilySupportNI web page at: <https://www.familysupportni.gov.uk/Support/91/provision-of-childcare-during-the-covid19-pandemic>.
15. Childminders should promote and practice effective infection control, including the following:
- Frequently handwashing with soap and water (or using hand sanitizer where soap and water are not available): The importance of frequent handwashing with soap and water for 20 seconds (or using hand sanitiser where soap and water are not available) and drying thoroughly is emphasised, including:
 - Before and after handling food, feeding a child, or eating;
 - Before and after using the toilet, changing a nappy, or helping a child use the bathroom (also wash the child's hands after helping the child use the bathroom or changing their nappy); After a child or childminder uses the toilet, the lid should be put down first before flushing. Afterwards the childminder should always wash their own and the child's hands;
 - Ensure there is always extra cleaning of the toilets, taps and door handles;
 - If using a shared soap dispenser it is a good idea to clean after use;
 - After helping a child wipe their nose or mouth or tending to a cut or sore;
 - After playing in play areas;
 - Before and after giving medicine to a child;
 - After handling waste baskets or garbage; and
 - Washing a child's hands on arrival at the setting and before they go home;

- Ensuring that the surfaces that children are touching, such as toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters are cleaned more regularly than normal.
- Encouraging children to use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it').
- Ensuring that help is available for children and young people who have trouble cleaning their hands independently.
- Limiting close contact with others as much as possible, acknowledging that this is not possible if working with babies, toddlers and younger children.
- Where possible the child should be put into the care of the childminder at the door of the childminder's house.
- The childminder should avoid touching their own face, and where it is age appropriate discourage the children to do the same.
- Where possible, ensuring all spaces are well ventilated using natural ventilation (opening windows) or ventilation units.
- Ensuring that doors are propped open only if they are not fire doors, and where it is safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
- Safely using cleaners and disinfectants on surfaces and objects, which includes:
 - Consideration of the hazards of the cleaners and disinfectants available for use;
 - In accordance with public health advice, removing all soft toys, and any toys that are hard to clean, such as those with intricate parts; and, where practicable, removing soft furnishings, for example pillows, bean bags and rugs.
 - Wearing gloves; and
 - Ensuring cleaners and disinfectants are used in a manner that does not endanger yourself or children at the setting.

Helping Children and Young People Understand the Public Health Measures in Place

16. It should be noted that some children will need additional support to help them understand why the public health measures being recommended by this Guidance are being followed. The use of meaningful symbols and social stories to support children to understand how to follow rules is advised. As far as possible, use innovative methods to inform children, appropriate to their age, on how they can help prevent the spread of COVID-19, including:

- Frequent hand washing;
- As far as possible, avoiding close and direct contact with other children;
- Telling the childminder as soon as possible if they feel sick;
- Promoting good coughing and sneezing etiquette (cover coughs and sneezes with a tissue or sleeve; not hands);

- Discouraging children from sharing food, drinking cups, eating utensils, towels, toothbrushes, etc.

Drop Off, Pick Up

17. When children are being dropped off and picked up by their parents, the following steps should be considered:

- tell children and parents not to enter your home if they are displaying any symptoms of coronavirus (COVID-19) (following the COVID-19: guidance for households with possible coronavirus (COVID-19) infection is available at: <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>;
- tell parents that only one parent should attend to drop off or collect their child. Parents and carers should not be allowed into your home unless this is essential, and children should be collected at the door if possible.
- stagger drop off and collection times as much as possible and tell parents the process for doing so.

Maximising use of outdoor spaces

18. Evidence suggests that outdoor environments can limit transmission, as well as more easily allowing for natural physical distancing between children, and childminders should consider how they can safely maximise the use of their outdoor space.

19. Where childminder has access to a garden, they should try to use this space as much as possible across the day.

20. Childminders should plan for children to enjoy active energetic play across the day and this may include making use of other areas near to the service. Childminders should risk assess and plan for use of any public spaces, and should be aware at all times of the need to physically distance and to keep children distanced from any other children or adults who may be in the vicinity.

21. Once play parks have been opened (most will be open from July 10th), childminders should obtain parents' consent before taking children to a play park. In addition to the usual risk assessment required before taking children to a play park, childminders should prepare to leave the park if it is, or becomes, crowded. Children's hands must be washed/sanitised before and after touching park equipment, and they should be encouraged to refrain from touching their faces while playing in the park. Childminders should check with their local council or check www.playboard.org for any additional guidance on the use of play parks.

22. Childminders who plan to meet up with other childminders in parks or other public areas should include this in their risk assessment, ensure they adhere to current Government Guidance, and seek parents' consent.
23. Childminders should take the necessary precautions to protect children from the elements and this should include suitable clothing, head coverings and sunscreen.

Children with symptoms of coronavirus

24. A childminder must have in place a clear plan for dealing with children who become ill.
- Children should not attend if they have symptoms or are self-isolating due to symptoms in their household.
 - A plan should be put in place for sharing information and guidelines with parents and guardians that includes:
 - A system to check with parents and guardians daily on the status of their children when children are dropped off;
 - Ensuring that up-to-date email addresses and home, work, and mobile phone numbers from parents and guardians of children so that they can be reached at all times and testing that they can be reached;
 - Communicating with parents and guardians that children should stay at home if they are sick, have been in contact with someone who has tested positive for Covid-19, or if someone in the household has symptoms (cough, fever, shortness of breath, or has a loss of, or change in, their normal sense of taste or smell);
 - Ask parents and guardians to check their children every day before coming to the childminder's home and to keep their children at home if their temperature is high, that is, if they feel hot to touch on the chest or back - they do not need to measure the child's temperature.);
 - Requiring parents to advise the childminder if they, their child or any other family member with whom they live or have had contact has tested positive for COVID-19; and
 - Know how to notify the HSC Trust Early Years Team and Public Health Agency if any child or parent who has been in the childminder's home has a COVID-19 infection.

If a Child Becomes Sick while in the childminder's home

25. If a child becomes sick in the childminder's home, regardless of whether they display symptoms of COVID-19 (high temperature 37.8 degrees, or has a loss of, or change in, their normal sense of taste or smell (anosmia), and/or a new continuous cough):
- Contact the parents or guardians immediately.

- For children over 5 years of age, the APP COVID-19 NI (Health and Social Care Northern Ireland) can be downloaded (download links available at: <https://www.nidirect.gov.uk/articles/coronavirus-covid-19-overview-and-advice>) and used to access advice based on the child's specific symptoms.
- While the child is awaiting collection, they should be moved to a room where they can be isolated behind a closed door, if possible and it is safe to do, 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 in the home.
- PPE should be worn by a childminder 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).
- If direct care is required, such as nappy changing, while waiting for the child to be collected, you should wear PPE - a mask, plastic apron and gloves.
- 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.
- In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do **not visit the GP, pharmacy, urgent care centre or a hospital.**

Confirmed case of coronavirus (COVID-19) in a childminder's home

26. When a child develops symptoms compatible with coronavirus (COVID-19), they should be sent home and advised to self-isolate for 7 days and arrange to have a test to see if they have COVID-19 and follow all further medical advice. They can do this by visiting <https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19#testing-for-essential-workers>. Their fellow household members should self-isolate for 14 days.
27. Where the child tests negative, they can return to their setting and the fellow household members can end their self-isolation.
28. Where the child tests positive, any children who had been minded along with the child should be sent home and advised to self-isolate for 14 days. The household members of these other children do not need to self-isolate unless the child subsequently develops symptoms. The childminder can arrange to be tested, following the latest guidance available at <https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19#testing-for-essential-workers>.
29. As part of the national test and trace programme, if other cases are detected within the cohort, the Public Health Agency will conduct a rapid investigation and will advise childminders on the most appropriate action to take. More information

is available at <https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19/contact-tracing>.

Personal Protective Equipment (PPE)

30. Childminders will not require PPE even if they are not always able to maintain a distance of 2 metres from others. PPE is only needed in a very small number of cases including:

- children whose care routinely already involves the use of PPE pre-COVID-19 due to their particular circumstances and intimate care needs. In these situations they should continue to receive their care in the same way as they did pre-COVID-19; and
- if a child becomes unwell with symptoms of coronavirus (COVID-19) while in the childminder's home and needs direct personal care until they can return home, a face mask, plastic apron and gloves should be worn by the childminder. If there is a risk of splashing to the eyes, for example from coughing, or spitting, then eye protection should also be worn.

Coronavirus Testing

31. Children over the age of 5 years, and members of their households, will have access to testing if they display symptoms of coronavirus (COVID-19). This will enable them to get back into childcare and their parents or carers to get back to work, if the test proves to be negative. Parents will have a number of routes to access testing for them and their children 5 years and over, they should contact their GP. Access to priority testing is already available to all essential workers including childminders. More information is available at: <https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19>.

Shielded and clinically vulnerable children and young people

32. For the vast majority of children and young people, coronavirus (COVID-19) is a mild illness. Children and young people (0 to 18 years of age) who have been classed as clinically extremely vulnerable due to pre-existing medical conditions have been advised to shield. It is not expected these children will be attending childcare and they should continue to be supported at home as much as possible. Clinically vulnerable (but not clinically extremely vulnerable) children are those considered to be at a higher risk of severe illness from coronavirus (COVID-19). The parents of children in this category should follow medical advice if their child is in this category.

Shielded and clinically vulnerable adults

33. Clinically extremely vulnerable individuals are advised not to work outside the home. We are strongly advising people, including childminders, who are clinically extremely vulnerable (those with serious underlying health conditions which put them at very high risk of severe illness from coronavirus (COVID-19) and have been advised by their clinician or through a letter) to rigorously follow shielding measures in order to keep themselves safe. Any childminder in this position is advised not to provide childcare.
34. If a childminder lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can continue to childmind. Likewise, a child who lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, can continue to be childminded.
35. If a childminder lives in a household with someone who is extremely clinically vulnerable, as set out in the COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable guidance, it is advised they do not childmind. Likewise, a child who lives in a household with someone who is extremely clinically vulnerable should not be childminded. Read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice.
<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

Paediatric First Aid Certification

36. The Minimum Standards require that childminders must have an up to date paediatric first aid training is present at all times. This requirement remains unchanged. It is acknowledged that face to face Paediatric First Aid Training is not possible currently but successful completion of online Paediatric First Aid Training is available through the Childcare Partnership Training Programme accessible on this link <http://childcarepartnerships.hscni.net/training-quality/training-quality-courses/>. This training is acceptable on condition that the participant completes the practical exercise component completed on a face to face basis as soon as it is available. If settings cannot meet the above requirement they must notify the HSC Trust Early Years Team.
37. If a childminder needs to renew their paediatric first aid certificates they also should visit the Childcare Partnership website for information on the online training on offer. If Paediatric First Aid 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 by up to 3 months with the agreement of the HSC Trust Early Years Team. This applies to certificates expiring on or after 16 March 2020.

Childminders must do their best to arrange requalification training at the earliest opportunity.

Inspections of Childminders

38. Trust Early Years Teams may carry out an inspection during COVID-19, where it is considered necessary or appropriate.

Indemnification

39. A formal letter of indemnification will issue to each 'open' Childcare provider, intended to cover any COVID-19 related claims which are not covered under the provider's usual insurance arrangements for July and August 2020.

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

- [Professional association for children and early years \(PACEY\): supporting children in your setting](#)
- [Dr Dog explains coronavirus](#)
- Busy Bees:
 - [2 metres apart activity \(PDF, 2MB\)](#)
 - [Our hand washing song \(PDF, 958KB\)](#)
- [Bright Horizons: Talking to Children about COVID-19 \(novel coronavirus\)](#)