COVID-19 ADVICE FOR CHILDCARE PROVIDERS

Ensuring that key staff who are critical to the fight against COVID-19 and have access to childcare during the pandemic is a priority. However there is also a need to rethink some of the usual ways that childcare is provided to ensure that children receive safe care and the spread of COVID-19 is minimised. 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 vulnerable children or the children of key workers in your care and the staff who care for them.

Please note that this guidance will be updated regularly and available on https://www.familysupportni.gov.uk

Please ensure that you are reading the latest version.

Guidance includes:

1. Restrictions in Numbers and mixing of age groups;

2. Staff Training relating to COVID-19; and

3. Best Infection-control Practice

4. Effective COVID-19 policies and procedures

1. RESTRICTION IN NUMBERS AND THE MIXING OF AGE GROUPS

1.2. In the current pandemic it will be necessary for numbers to be restricted in daycare. The restriction will depend on the numbers of rooms and staff available to care for the children.

1.3 In particular it will be better to incorporate very young children into smaller groups, if possible with their older siblings. This is important for two reasons, firstly, because it is not possible to implement social distancing measures with young children, and secondly keeping families together at this challenging time may provide children with reassurance. In order to accommodate this the current requirement to have children of less than 2 years of age in a separate room will be suspended. If non mobile children are in a room with older children then there should be a risk assessment. In addition, suspending this requirement allows siblings to be cared for together as a family group.
1.4 The guidance in the Implementation Guidance on mixing of age groups has also been suspended to allow children of different ages to be mixed in small groups. However there will still be a requirement to have two workers in a room in line with the current requirements.

1.5 Staff/child ratios:

The current standard recommends staff/child ratios as follows:

- 0 to 2 years = 1:3
- 2 to 3 years = 1:4
- 3 to 12 = 1:8

However in the current pandemic children will be cared for in mixed age groups. Therefore the provider having taken account of the recommended ratios above should determine the ratio of staff to children in each room to ensure that meet the children’s needs and they can provide safe care.

1.6 In the current circumstances of the pandemic and staffing challenges the requirement that the Registered Person has a suitably qualified person in charge (defined as a person with the appropriate Level 5 Diploma or equivalent) on duty at all times is suspended. Instead a suitably qualified person in charge must available by phone at all times and they must be able to travel to the setting if required.

2. STAFF TRAINING RELATING TO COVID-19

2.1 The Person in Charge is responsible for ensuring that all staff members have access to on line training on COVID-19, including how the illness is spread, how to prevent its spread, symptoms, and when to seek medical assistance for sick children or staff. The cost of any training will be met by the Health and Social Care Board.

3. BEST INFECTION-CONTROL PRACTICE

3.1 The following guidance is intended to be helpful. It is acknowledged that settings have policies already in place in relation to infection control, and if this has not happened already they must be updated to take account of COVID-19.

3.2 The Person in Charge should promote and facilitate best infection control practice, including the following:

- The importance of frequent handwashing with soap and water (or using hand sanitizer where soap and water are not available), including:
  - When employees arrive at the setting and before they leave the setting;
Before and after handling food, feeding a child, or eating;
Before and after using the toilet, changing a diaper, or helping a child use the bathroom (also wash the child’s hands after helping the child use the bathroom or changing their diaper);
After helping a child wipe their nose or mouth or tending to a cut or sore;
After working in sandboxes and similar children’s play areas;
Before and after giving medicine to a child;
After handling wastebaskets or garbage.

- Limiting close contact with others as much as possible, acknowledging that this is not possible if working with babies and toddlers and younger children.

- Safely using cleaners and disinfectants on surfaces and objects, which includes:
  - The hazards of the cleaners and disinfectants available for use at the worksite.
  - Wearing personal protective equipment (such as gloves).
  - Ensuring cleaners and disinfectants are used in a manner that does not endanger employees or children at the setting.

- The importance of staying home if they have a frequent cough, sneezing, fever, or difficulty breathing.

4. EFFECTIVE COVID-19 POLICIES AND PROCEDURES

4.1 The Person in Charge must have in place procedures to follow when children become sick at the setting and to protect children and employees from COVID-19 illness. The following procedures should be developed and implemented to help prevent the spread of COVID-19:

- Establish a plan 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 at the setting;
  - up-to-date email addresses and home, work, and mobile phone numbers from parents and guardians of children at the setting so the setting can reach them at all times and testing that methods of communication work;
  - Providing parents and guardians with information from on COVID-19 symptoms, transmission, prevention, and when to seek medical attention;
- Encouraging parents and guardians to share the information with their children as appropriate;
- 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);
- Establishing voluntary methods for parents and guardians to help screen their children for COVID-19 symptoms. Communicating such methods with parents and guardians. (For example, ask parents and guardians to check their children’s temperatures every day before coming to childcare 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 Registered Person or Person in Charge if they, their child or any other family member has tested positive for COVID-19.

- Establish a procedure to notify the Public Health Agency and the Trust Early Years Team upon learning that someone who has been at the childcare setting has a COVID-19 infection. These officials will help administrators determine a course of action.
- Establish educational 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 and setting staff;
  - Telling their childcare staff 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.

- Establish a plan for children who become sick at the setting. The plan should include:
  - Procedures for contacting parents and guardians immediately and criteria for seeking medical assistance.
  - Designated areas where sick children can be isolated and attended to by a limited number of trained staff.
  - Masks for sick older children to use if they agree, since masks worn by sick persons help prevent the spread of germs to others (but do not effectively protect the wearer from getting COVID-19 so people who are not sick should not wear them).
Establish procedures to routinely clean and disinfect frequently touched surfaces and objects (e.g. doorknobs, light switches, classroom sink handles, countertops, shared toys). These procedures should include:

- Providing EPA-registered disposable wipes for employees to wipe down commonly used surfaces (e.g., keyboards, desks, remote controls) before use;
- Following the manufacturer’s instructions for all cleaning and disinfection products (e.g. safety requirements, protective equipment, concentration, contact time);
- Ensuring as far as possible that there are adequate supplies to support cleaning and disinfection practices.